Testimony in Support of HB 1283 Senate Industry and Business Committee Senator Jeff Bart, Chair

March 18, 2025

Chair Barta and honorable members of the Senate Industry and Business Committee,

My name is Kim Kuhlmann and I am asking you to recommend a do pass on HB 1283, which would eliminate cost sharing for diagnostic breast imaging in the early detection of cancer.

Between 40-50% of women in the U.S., including myself, have dense breast tissue. Dense breast tissue is hard to see through on a mammogram and makes it more difficult to determine what's dense breast tissue and what's breast cancer with a mammogram alone. Dense breast tissue also means you are at a higher risk for having breast cancer. Additional tests such as ultrasound and MRI make it easier to detect breast cancer in dense breasts and other patients who are at high-risk.. As I recently discovered, these additional tests result in patients paying out of pocket.

In December 2024, I went in for a mammogram and received a call that I needed to follow up with a second mammogram and ultrasound. One of my first questions was if the procedure would be covered by my insurance. It took me four hours of going back and forth between the provider and my insurance company to determine that the procedure codes were covered by insurance, but the insurance company only pays for one breast screening per year. Both procedures would be my responsibility to pay and I was given an estimate of close to \$1,000 for the two procedures. I wouldn't know until the day of the second mammogram if they would need to also do an ultrasound.

The technology for screenings, especially for those of us who have dense breast tissue, has improved greatly but the payments for these new screening options have not kept up. I'm fortunate that I make enough to pay for these screenings out of pocket at this time, but there are those whose life circumstances mean these additional screenings will cost too much, they will delay finishing the screening process, and could result in more costly cancer treatment with a late stage diagnosis.

We have the technology to detect cancer early when the treatment options cost less. We should encourage women to get FULLY screened by reducing as many barriers as we can to early detection.

While this bill only applies to NDPERS at this time, I hope that you will support HB 1283 to start the process of eliminating cost-sharing for all preventative breast cancer screenings for North Dakota women.

Thank you

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