



***Written Testimony Supporting SCR 4009
Senate Human Services Committee - February 13, 2023
By Susan G. Komen***

Madam Chair Lee, Vice Chair Cleary, and Members of the Senate Human Services Committee thank you for the opportunity to provide testimony in support of SCR 4009. My name is Bobbie Will and I am the State Policy and Advocacy Manager at Susan G. Komen®.

Komen is the world's leading nonprofit breast cancer organization representing the millions of people who have been diagnosed with breast cancer. Komen has an unmatched, comprehensive 360-degree approach to fighting this disease across all fronts—we advocate for patients, drive research breakthroughs, improve access to high-quality care, offer direct patient support and empower people with trustworthy information. Komen is committed to supporting those affected by breast cancer today, while tirelessly searching for tomorrow's cures. We advocate on behalf of the estimated 600 people in North Dakota who will be diagnosed with breast cancer and 70 who will die from the disease in 2023 alone.

Widespread access to preventive screening mammography is available to millions of women as a result of the Affordable Care Act (ACA). Unfortunately, most individuals at a higher risk of breast cancer or those requiring follow-up imaging due to an abnormal mammogram result face hundreds to thousands of dollars in patient cost sharing for this required imaging – all before they are even potentially diagnosed with breast cancer. Mammography is only the initial step in the early detection process and is not able to alone diagnose cancer. Early detection of breast cancer is not possible without the medically necessary diagnostic follow-up or additional supplemental imaging required to rule out breast cancer or confirm the need for a biopsy. An estimated 12-16 percent of women screened with modern digital mammography will require follow-up imaging.

A Komen-commissioned study found the out-of-pocket costs for patients to be high, with much variation for diagnostic breast imaging. For example, average patient cost for a mammogram is \$234, and for a breast MRI, \$1,021. The study also found that the inconsistency in cost and coverage is a recognized concern among patients and health care providers. Which leads to additional stress and confusion for patients who are already dealing with the daunting possibility of a breast cancer diagnosis.

Unfortunately, we often receive calls and emails from individuals who are unable to afford the out-of-pocket costs for their recommended breast imaging. Without assistance, many will simply delay or forego these medically necessary tests. This delay can mean that patients will not seek care until cancer has spread making it much deadlier and much more costly to treat. Breast cancer can be up to five times more expensive to treat when it has spread beyond the breast to other parts of the body.

Additionally, screening delays and cancellations during the COVID-19 pandemic have raised concerns about associated increases in "missed" and late-stage cancer diagnoses and mortality. Although we don't know the full impact of the pandemic, emerging data in the two years since the pandemic has reinforced these concerns. The potentially "missed" cancers could be larger and more advanced once ultimately detected, often requiring the use of diagnostic imaging.

As committed partners in the fight against breast cancer, we know how deeply important it is for all cancer patients to have fair and equitable access to breast imaging that may save their lives. As such, we support SCR 4009 and urge you to pass this resolution. Thank you for your consideration.