



The American College of  
Obstetricians and Gynecologists  
WOMEN'S HEALTH CARE PHYSICIANS

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Oregon Radiological Society

March 20, 2023

Senator Deb Patterson  
Chair, Senate Committee on Health Care  
900 Court St. NE, S-215  
Salem, OR 97301

RE: SB 1041 – Breast diagnostic imaging

Chair Patterson and Members of the Senate Health Care Committee:

The above patient and provider organizations encourage your support of SB 1041, which would eliminate out-of-pocket costs for medically necessary diagnostic and supplemental breast imaging under commercial insurance.

Access to preventive screening mammography, without cost sharing, is widely available because of the Affordable Care Act. Unfortunately, patients requiring follow-up imaging and those at a higher risk of breast cancer (who are initially screened with more advanced imaging) will likely face hundreds to thousands of dollars in out-of-pocket costs. Studies have shown that individuals facing high out-of-pocket costs associated with diagnostic and supplemental imaging are less likely to have their recommended follow-up scans. This can mean that the patient will delay care until the cancer has spread to other parts of the body, making it much deadlier and more costly to treat.

An estimated 12-16 percent of women screened with modern digital mammography require follow-up imaging. In these cases, a screening mammogram would not be considered successfully completed if the follow-up imaging was not performed to rule out breast cancer or confirm the need for a biopsy. In addition, 15 percent of women (and some men) are considered “high-risk,” based on family or genetic history, a previous breast cancer diagnosis, or dense breasts, and these patients can benefit from annual screening with advanced imaging in place of or supplemental to digital mammography.

Breast cancer screening and follow-up diagnostics have led to significant increases in the early detection of breast cancer in the past 30 years, reducing breast cancer mortality in the U.S. by 40 percent. Yet recent studies show that this is not the case for all demographic groups. Most notably, while white women have the highest incidence of breast cancer, commercially-insured Black

breast cancer patients are diagnosed at a later stage and have a higher mortality rate when compared with their white counterparts with the same insurance status. Additionally, Hispanic women are more often diagnosed with later stage breast cancers than non-Hispanic white women.

One in eight women in the U.S. will be diagnosed with breast cancer in her lifetime. In Oregon, more than 4,200 individuals will be diagnosed with breast cancer and more than 570 will die of the disease in 2023 alone. As committed partners in the fight against breast cancer, we know how deeply important it is for all patients to have equitable access to the breast imaging that may save their lives.

We respectfully request your support of SB 1041.

For more information, please contact Kirsten Smith of Susan G. Komen at [kismith@komen.org](mailto:kismith@komen.org) or 206-708-3199.