

Navigating Pathways to Advance Health Policy

A 2024 Policy Case Study to Enhance Insurance Coverage for Supplemental Breast Imaging in New York State

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Policy Goal

Advance legislation to enhance
insurance coverage for supplemental
breast cancer screening



Dear Patient:

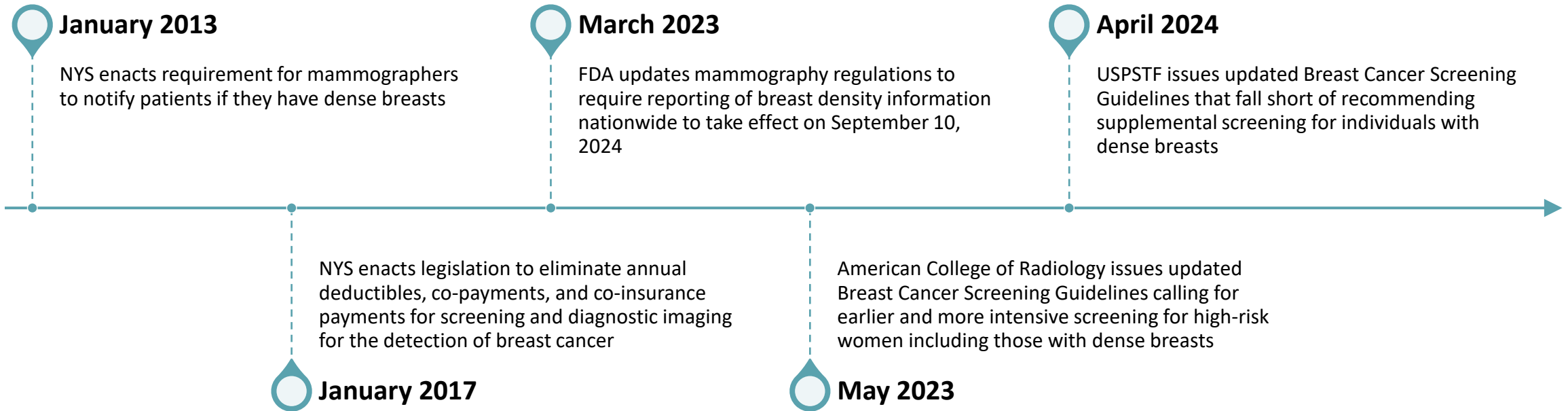
Your mammogram shows that your breast tissue is dense. Dense breast tissue is very common and is not abnormal. However, dense breast tissue can make it **harder to find cancer on a mammogram and may also be associated with an increased risk of breast cancer.**

This information about the result of your mammogram is given to you to raise your awareness. Use this information to talk to your doctor about your own risks for breast cancer. At that time, **ask your doctor if more screening tests might be useful, based on your risk.** A report of your results was sent to your physician.

Coverage Gaps for Patients with Dense Breasts

- Since 2014, NYS has required notification to patients who have dense breasts
 - Patients informed of risks of dense breasts
 - Recommended to ask their doctor about additional screening tests
- Insurance law loopholes allow health plans to deny coverage for supplemental breast cancer screening for individuals with dense breast tissue based on their determination of medical necessity

Historical Background



National Policy Landscape

Pending Federal “Find it Early Act” (HR 3086), Reps. Rosa DeLauro and Brian Fitzpatrick

- Would ensure all health insurance plans cover screening and diagnostic breast imaging with no out-of-pocket costs for women with dense breasts or at higher risk for breast cancer

Other States Enacting Enhanced Supplemental Screening Coverage Policies:

2023 Passage of Maryland Legislation: HB 376/SB 184

- Prohibits insurers from imposing co-payments, coinsurance, or deductible requirements for diagnostic and supplemental breast examinations

2023 Passage of Rhode Island Legislation: HB 5283

- Mandates insurance coverage for any additional screenings deemed medically necessary for individuals who have received notice of dense breast tissue in accordance with American College of Radiology recommendations.

NYS Policy Context

Existing Legislation in NYS

- **S2917, Cleare/ A2516, Paulin: Would utilize a notification of dense breast tissue as justification of medical necessity for supplemental breast ultrasounds**
 - Drawbacks:
 - Would not include coverage for breast screening MRI or diagnostic imaging
 - Bill was a non-starter for Assembly Insurance
- **S2465, Persaud/ A1696, Hunter: Would have allowed an additional 120 days for a second mammogram after an initial mammogram shows an abnormality or dense breast tissue**
 - Drawbacks:
 - Bill did not align with clinical standard of care

Policy Opportunity

- Recent reports of health plan denials for supplemental screenings
- Seven years since enactment of last breast cancer screening coverage requirements
- Elevated interest during an election year
 - Governor Hochul prioritizing healthcare affordability and access
 - Assembly and Senate Insurance Committees
 - Key lawmakers committed to enhancing cancer screening access and reducing health disparities



Compromise Legislation

S2465-C, Persaud/ A1696-C, Hunter

- Amendments agreed upon by Assembly & Senate Insurance Committees
- NYSRS pushed for references to “nationally recognized clinical practice guidelines” that recommend supplemental screening for patients with dense breasts
 - [American College of Radiology](#)
 - [National Comprehensive Cancer Network](#)
 - [Society of Breast Imaging](#)
 - [The American Society of Breast Surgeons](#)

1 (iii) an annual mammogram, which may be provided by breast tomosynthe-
2 sis, for covered persons aged forty and older; and
3 (iv) upon the recommendation of a physician, screening and diagnostic
4 imaging, including diagnostic mammograms, breast ultrasounds, or magnet-
5 ic resonance imaging, recommended by nationally recognized clinical
6 practice guidelines for the detection of breast cancer. For the purposes
7 of this item, "nationally recognized clinical practice guidelines" means
8 evidence-based clinical practice guidelines informed by a systematic
9 review of evidence and an assessment of the benefits, and risks of
10 alternative care options intended to optimize patient care developed by
11 independent organizations or medical professional societies utilizing a
12 transparent methodology and reporting structure and with a conflict of
13 interest policy.
14 (B) Such coverage required pursuant to subparagraph (A) or (C) of this
15 paragraph shall not be subject to annual deductibles or coinsurance. If
16 under federal law, application of this requirement would result in
17 health savings account ineligibility under 26 USC 223, this requirement
18 shall apply for health savings account-qualified high deductible health
19 plans with respect to the deductible of such a plan after the enrollee
20 has satisfied the minimum deductible under 26 USC 223, except for with
21 respect to items or services that are preventive care pursuant to 26
22 USC 223(c)(2)(C), in which case the requirements of this paragraph shall
23 apply regardless of whether the minimum deductible under 26 USC 223 has
24 been satisfied.



Effective Advocacy

Policy Considerations

- Clinical guidelines and recommendations
- Limitations of mammography for patients at higher risk
- Benefits of early breast cancer detection
- Breast cancer incidence and mortality disparities



Breast cancer death rates are
**40% higher among
Black women**
than white women.

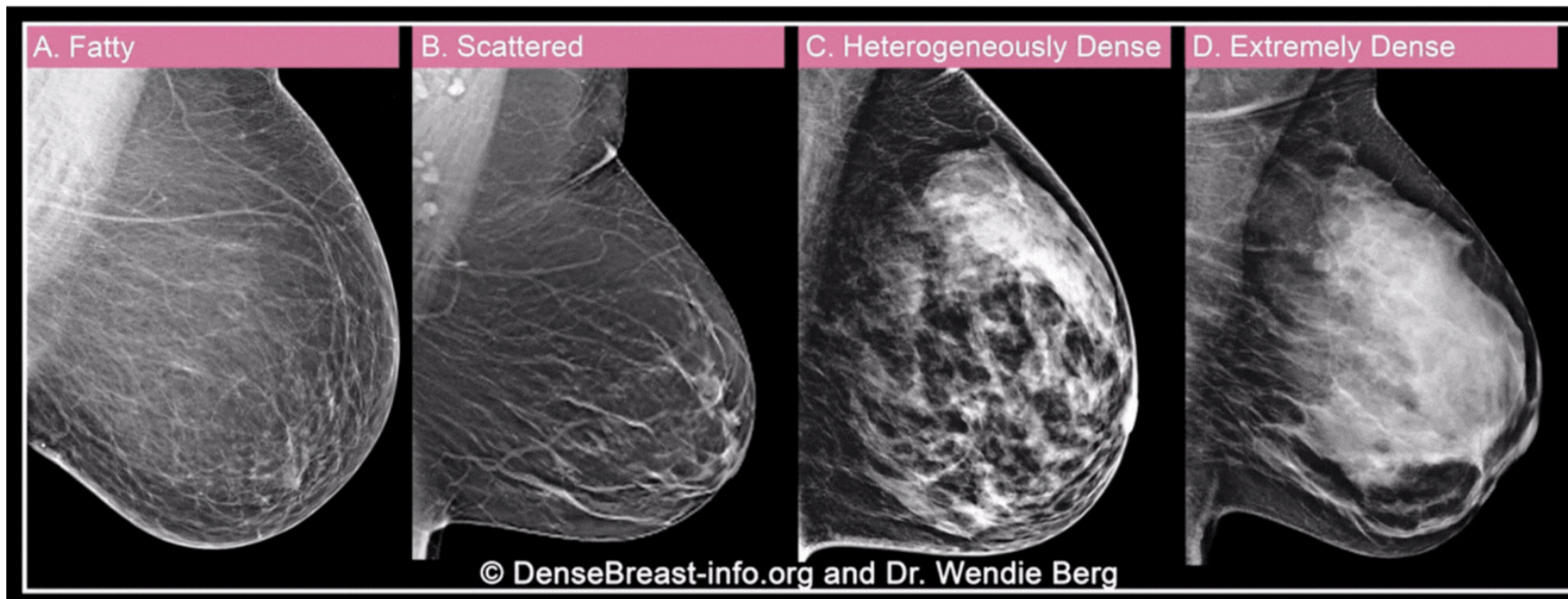


47% of women
put off or postponed
preventive services due
to costs.



Lawmaker Education

Mammography



Breast Ultrasound





9/27/24

Honorable Kathy Hochul
Executive Chamber
New York State Capitol
Albany, NY 12224

Re: A1696-C, Hunter/ S2465-C, Persaud, to provide commercial insurance coverage for supplemental breast cancer screening and diagnostic imaging

Dear Governor Hochul:

The signatory organizations below strongly support legislation A1696-C, Hunter/ S2465-C, Persaud which would require commercial health insurance coverage of supplemental screening and diagnostic breast imaging including mammography, breast ultrasound and breast magnetic resonance imaging (MRI). Our organizations respectfully request your signature on this legislation to enhance access to breast cancer screening in New York State, particularly for individuals with dense breast tissue.

Radiology practices are legally required to notify women if they are found to have dense breasts on mammography imaging. This notification is important because dense breasts can make a mammogram more difficult to interpret. This is because dense breast tissue and an abnormality, which may be benign or malignant, may appear white on a mammogram. This makes mammography less sensitive for women with dense breasts and may lead a provider to recommend additional screening exams. Dense breast tissue also increases an individual's inherent cancer risk. Women with extremely dense breasts have approximately twice the risk of women at 'average' risk of breast cancer.

In New York, when patients are notified that they have dense breasts, they are instructed to "ask your doctor if more screening tests might be useful". These discussions may lead a provider to recommend supplemental screening based on an assessment of the patient's

overall risk profile. However, New York law currently does not require health insurance coverage for all clinically recommended supplemental breast cancer screenings. Recently, this has resulted in some New York-based health plans denying coverage for screenings that are recommended by a provider for individuals with dense breasts.

Legislation would require coverage for supplemental screening including ultrasound or MRI in line with nationally recognized clinical practice guidelines like those published by the American College of Radiology, the National Comprehensive Cancer Network, the Society of Breast Imaging, and The American Society of Breast Surgeons. These guidelines support supplemental screening for individuals with dense breast tissue.

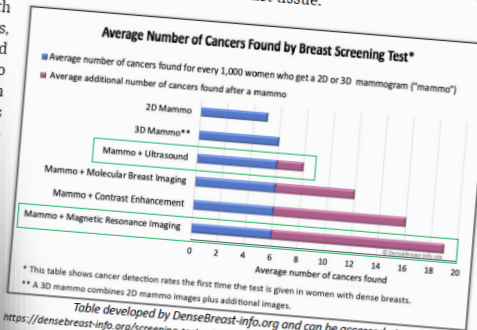


Table developed by DenseBreast-info.org and can be accessed at:
<https://densebreast-info.org/screening-technologies/for-patients-screening-tests-after-a-mammogram/>

affected by breast density, and all are proven to increase breast cancer detection. As shown in the chart, MRI finds more cancers than any other screening test in dense breast tissue. Ultrasound is also effective in detecting some cancers not detected by mammography and can be more easily tolerated as they do not expose a patient to ionizing radiation. Any type of supplemental screening tool in women with dense breasts can detect additional stage, invasive breast cancers than a mammogram alone. The additional cancers detected, by type of additional screening test, are shown in the chart after a "normal" mammogram.

Legislation to recommend supplemental breast cancer screening aligns with the goal to eliminate health inequities. In New York, black women have the highest incidence rates of breast cancer and a higher likelihood that women of color are diagnosed with breast cancer at later stages. When patients cannot afford the prohibitive costs of supplemental screening, they may delay or forego this imaging, preventing early diagnosis of breast cancer and a significantly higher survival rate (93% or higher) in the long term.

Joint Advocacy

Grassroots Advocacy

Contact Governor Hochul Today!

Dear Dr. ,

Earlier this year, the New York State legislature passed a bill (A1696-C/S2465-C) which would require commercial health insurance coverage of supplemental breast cancer screening and diagnostic breast imaging conducted by mammography, breast ultrasound and breast magnetic resonance imaging (MRI) when recommended by a physician. The New York State Radiological Society strongly supports this legislation on behalf of patients across New York State who require medically necessary supplemental breast cancer screening or diagnostic imaging, including patients with dense breast tissue.

This bill has now been sent to Governor Kathy Hochul and she has until October 1st to act on it. We need your help to persuade her to sign this bill into law. Please act now and ask Governor Hochul to sign the bill to help NYers access supplemental breast cancer screening.

To send a letter to your Legislator(s) please click the Send Letter to Legislator(s) button, or if you would like to review and edit the letter please click the Preview/Edit button.

[Send an E-mail to Governor Hochul](#)

Thank you,

Donna D'Alessio, MD
Chair, Breast Imaging Committee
New York State Radiological Society



Policy Enactment

- S2465-C, Persaud/ A1696-C, Hunter passed by both houses late in the legislative session
- Governor Hochul signed the bill into law on October 1, 2024, marking the start of Breast Cancer Awareness Month



Implementation & Continued Advocacy

- Law effective date: January 1, 2026
- Interim plans to work with Department of Financial Services regarding implementation and applicability for supplemental screening for patients with dense breasts



Questions & Discussion