

**Embargoed for 5 PM Release  
November 16, 2009**

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**U.S. Preventive Services Task Force Mammography Recommendations Will  
Turn Back the Clock on the War on Breast Cancer**

***AMIC calls on Obama Administration to Reject Scientifically Unfounded Recommendations***

**Washington, D.C.** – Damaging new guidelines released today by the U.S. Preventive Services Task Force (USPSTF) opens the door for private insurers and Medicare to deny important mammography services to women and should be rejected outright, according to the Access to Medical Imaging Coalition (AMIC).

If adopted, the recommendations could result in public and private payers denying coverage for regular mammography screening to women 40 to 49 years of age, providing mammogram coverage only every other year for women between the ages of 50 and 74, and halt all screening in women over 74.

“More than any diagnostic test, mammography is responsible for the decline in breast cancer deaths over the last thirty years,” said Dr. Paula George, CDI Medical Director of Breast Imaging and a radiologist at Midwest Breast Care in St Louis, MO. “Today’s USPSTF recommendations fly in the face of President Obama’s support for preventive health care and I urge his Administration to reject these scientifically unfounded Task Force recommendations and continue to support women’s health by reimbursing for annual mammograms and urging women over age 40 to receive them.”

The recommendations – created by a federal government funded committee with no medical imaging or other medical specialist representation – advise that women in their forties should only be screened regularly if they are at high-risk for breast cancer. Since only 10 to 25 percent of women who develop breast cancer are at elevated risk, screening only high-risk women will miss a significant percentage of breast cancers, resulting in later-stage diagnosis, and many more preventable breast cancer deaths.

President Obama has historically been a strong advocate for preventive screenings and policies that support preventative medicine. In a September 9 speech before a joint session of Congress President Obama said: “Insurance companies will be required to cover, with no extra charge, routine checkups and preventive care, like mammograms and colonoscopies -- because there's no reason we shouldn't be catching diseases like breast cancer and colon cancer before they get worse. That makes sense, it saves money, and it saves lives.”

“The President has made clear that preventative screening like mammography saves lives and saves money. We agree,” said Tim Trysla, executive director at AMIC. “Unfortunately, Medicare has already refused to cover new technologies to increase the detection of colon cancer, is cutting payments for advanced diagnostic tests such as MRI of the breast by 50 percent, and now the USPSTF is paving the way for insurers to deny mammography coverage. This type of policy, which puts millions of women of all ages at risk, is contrary to the evidence and the President’s own words, makes no sense and should be rejected.”

Cuts recently released in the Centers for Medicare & Medicaid Services’ (CMS) 2010 Physician Fee Schedule will soon force doctors to scale back or discontinue medical imaging services by reducing payments to non-hospital practices by 48 percent for pelvis CT, 46 percent for MRI of the chest-spine, and 27 percent for cardiovascular-related services. Cuts to cardiology services could impact up to two-thirds of cardiovascular patients as practices are forced to shutter office locations.

In addition, provisions in congressional health care reform proposals would deny Medicare beneficiaries' access to advanced diagnostic services such as MR and CT as well as screening tests including mammography by sharply reducing physician reimbursements for imaging. These proposed Medicare cuts come on top of a 20 percent reimbursement cuts implemented in 2007.

Twenty patient organizations recently wrote to President Obama and Secretary Sebelius urging that Medicare payment policies preserve access to diagnostic imaging. The organizations wrote: "further deep reductions in Medicare reimbursements for diagnostic imaging would jeopardize the health of America's seniors by delaying or precluding their access to the front-line tools that turn early detection into effective treatment and patients into survivors."

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