

ACR, SBI Urge Congress to Pass Protecting Access to Lifesaving Screenings Act

Washington, DC (August 3, 2015) - Passage of the Protecting Access to Lifesaving Screenings Act (H.R. 3339) would ensure that women who want to get regular mammograms retain insurance coverage with no copay and avert thousands of unnecessary deaths resulting from implementation of draft United States Preventive Services Task Force (USPSTF) [breast cancer screening recommendations](#).

The American College of Radiology and Society of Breast Imaging strongly support the PALS Act, which would delay implementation of these recommendations for two years. We thank Reps. Renee Ellmers (R-NC) and Debbie Wasserman Schultz (D-FL) for introducing H.R. 3339 and encourage the House and Senate to act quickly to pass this vital legislation.

"The two-year delay allows consideration of recent large studies that showed mammography to be far more effective than the old studies the USPSTF analyzed. It also provides time for Congress to enact separate legislation that mandates a badly needed overhaul of the closed and outdated USPSTF process," said Debra Monticciolo, MD, FACR, chair of the American College of Radiology Breast Imaging Commission.

The ACA requires private insurers to cover exams without patient cost sharing given a grade of "B" or higher by the USPSTF. The Task Force gave routine screening of women ages 40-49 a "C" grade and gave a "B" grade only to biennial (every other year) screening for women 50-74. This would indicate that women ages 40-49 that choose routine screening and those 50-74 who want annual screening would not be guaranteed coverage. This may drastically impact underserved and rural areas.

According to [National Cancer Institute data](#), since mammography screening became widespread in the mid-1980s, the U.S. breast cancer death rate has dropped 35 percent. [Published analysis](#), using the task force's 2009 methodology, showed that if women ages 40-49 go unscreened, and those 50-74 are screened biennially, approximately 6,500 additional women each year in the U.S. would die from breast cancer. Many more would experience more extensive and expensive treatments than if their cancers were found early by a regular mammogram.

"The closed USPSTF process does not meet Institute of Medicine (IOM) standards for 'trustworthy' guidelines creation and needs updating. These USPSTF mammography recommendations are suspect until ACR and SBI recognized experts are included in a meaningful way in their creation," said Elizabeth A. Morris, MD, FACR, president of the Society of Breast Imaging.

Contact Joy Burwell at 202-263-2971 or jburwell@amplifypublicaffairs.net to arrange an interview with a spokesperson.