

Tomosynthesis could bring about \$550 million in cost savings per year: study
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Pairing digital breast tomosynthesis (DBT) with full field digital mammography (FFDM) for annual breast cancer screening could save \$550 million per year, according to a new study conducted by Truven Health Analytics.

Studies investigating DBT typically focus on its clinical benefits, but there was also a need for an economic analysis. "These studies have to be done," Dr. Laurie Fajardo, one of the authors of the study and professor of radiology at the University of Iowa College of Medicine, told DOTmed News.

"Medicare doesn't have the time to do a study on every single technology — there are millions of things I'm sure they want to investigate but can't."

Truven developed an economic model of a hypothetical managed care plan with one million members using two Truven Health Analytics MarketScan Research Databases. The researchers analyzed the economic impact of both FFDM alone and FFDM paired with DBT on 84,549 women between the ages 40 and 75 who underwent mammography screening each year.

The researchers took note of any diagnostic mammograms or breast ultrasound procedures performed following screening mammograms in a 6 month period. The base-case assumption is that the follow-up services rate for FFDM is about 15 percent, but the American College of Radiology and Agency for Healthcare Research and Quality state that the follow-up rate for FFMD and DBT together is 10 percent.

Using that information, the researchers concluded that 4,523 of the women who were screened with FFMD and DBT together would avoid undergoing follow-up imaging or biopsies. They estimated that the annual per patient cost savings would be \$28.53, which would translate to \$2.4 million per year for the hypothetical million-member health plan.

Based on the conservative estimate that half of the 39 million mammograms conducted each year in the U.S. are for screening purposes, the researchers concluded that \$550 million could be saved per year if reimbursement for DBT was \$50. That's significant because the cost of mammography screening is about \$8 billion per year, according to a 2014 study published in *Annals of Internal Medicine*.

In early November CMS established a current procedure terminology (CPT) code for DBT and will be paying \$57 for the procedure. But private insurers have not made the decision to provide coverage for the procedure yet.

"I don't think it will be long before commercial insurers catch up," said Fajardo. She has currently been "nudging" Blue Cross Blue Shield about it.

Fajardo also thinks that the patients will start demanding coverage when they start seeing more studies that prove that DBT can save money. Another study conducted by Christoph Lee of the University of Washington School of Medicine that also investigates the cost effectiveness of DBT is set to be published soon.

Now that DBT has a dedicated CPT code, the researchers are planning on conducting a follow-up study in about a year to investigate the broader economic implications of DMT adoption.