

Dear Mr. Cassenly,

March 29, 2016

My name is Lisa Wiedmuller. I am a Summerville, S.C. resident for the past 3 1/2 years. I am writing this letter with the hope of getting help to have 3D Automated Breast Ultrasound Scans to be considered as a yearly preventative screening, as are mammograms, and to have 3D Automated Breast Ultrasound Scans to be covered by medical insurance companies, as are mammograms.

In 2015, after my routine yearly mammogram screening, I was informed that I have dense breasts and was given a recommendation along with a pamphlet letting me know that for the best possible breast cancer detection, I would benefit from my routine yearly mammogram, along with a 3D Automated Breast Ultrasound Scan. Please read a copy of the pamphlet I have attached for your information and records. It is to my understanding that 40% of women in the United States have dense breasts, which is when women have more breast tissue than fat, which can then complicate the results of the mammogram due to the fact that the tissue is white,

but so are masses and lumps. Therefore, the additional use of the 3D scan, along with a mammogram, can help to increase the detection of possible cancer.

Upon deciding to add the 3D scan to my yearly mammogram screening, (which were performed on January 4, 2016), I found out that my medical insurance company Blue Cross/Blue Shield wasn't familiar with the 3D scan, nor were they sure if it would be covered or not. After making several frustrating phone calls to Blue Cross/Blue Shield, they said that more than likely they would not be covering the scan, especially if the breast center I went to, Trident Health Breast Care Center in Charleston, SC billed it as "diagnostic" instead of preventative... to my disappointment, frustration, and surprise, Trident Breast Center billed my routine yearly mammogram and the 3D scan as "diagnostic". As a result, I have had to pay approximately \$300.00 for these screenings. My mammograms have always be covered in full as a yearly preventative screening and should have been this year as well, and because the 3D scan can only get performed in conjunction with a

mammogram, it also should have been covered in full as a yearly preventative screening for a woman with dense breasts.

In closing, I'm sure you can sympathize with the fact that it's scary at mammogram time, and even more scary when there's the obstacle of dense breasts. I'm hoping that we can help to detect/eliminate breast cancer, but to also eliminate billing issues and financial strain. Thank you for taking the time to read my letter. I am grateful and appreciative for any help you can provide to create this much needed change.

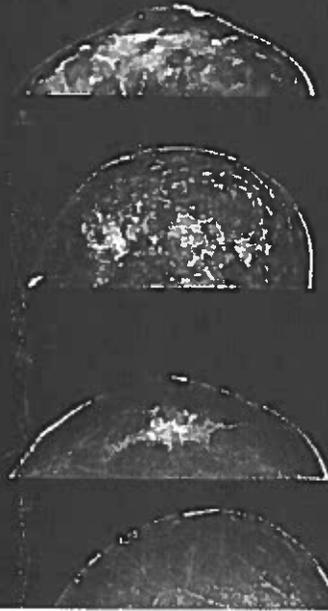
Sincerely,
Lisa Wiedmueller
195 Lotz Drive
Summerville, S.C. 29483
(843) 879-3603

All breasts are not the same.
Some are fatty, some are dense and some are a mix.

Breast Density — What does it mean?

Breasts are made of fat and breast tissue. Some women have more fat than breast tissue while others have more breast tissue than fat. When there is more breast tissue the breast is considered dense. On a mammogram dense tissue looks white. Since masses or lumps also appear white on a mammogram, a suspicious lump may be masked by the dense breast tissue.

Dense breast tissue is also linked with an increase in the risk of developing breast cancer. Women with extremely dense breast tissue have a 4 to 6 times greater risk of developing breast cancer than women who do not have dense breast tissue.¹ Invenia ABUS helps physicians look differently at dense breast tissue.



most entirely fatty Scattered fibroglandular densities Heterogeneously dense Extremely dense

Breast density is determined by the radiologist who reads your mammogram and classifies the density into one of four categories. Your doctor will tell you if you have dense breasts based on your mammogram's classification on the density scale.

¹ Boyd et al., *British Medical Journal* 2007; 336:227-36. Women with dense tissue at 75% or more of the breast have a risk of breast cancer four to six times as great as the risk among women with little or no dense tissue.

Look differently.

Invenia™ ABUS — the only breast cancer screening technology FDA-approved¹ for detection in women with dense breast tissue.

Should I have an Invenia ABUS screening exam?

Invenia ABUS breast cancer screening is specifically developed to help doctors find cancers hidden in dense breast tissue, which may be missed by mammography.

If you have dense breast tissue, like 40% of women in the U.S., the addition of ABUS (Automated Breast Ultrasound) screening can increase the detection of cancers. Invenia ABUS screening along with your screening mammogram will help provide a clear evaluation of your dense breast tissue.

The Invenia ABUS screening experience.

From the moment you lie down on the exam table, you'll realize that Invenia ABUS screening is completely unlike a mammogram. A layer of lotion is applied to your breast, and then a scanner is firmly positioned on your breast to acquire the images. The exam takes approximately 15 minutes and provides your doctor with clear 3D ultrasound images. The physician will review the ABUS screening images along with your mammogram.

Unlike 2D or 3D mammography, which uses radiation, Invenia ABUS screening uses sound waves to create 3D pictures of the breast tissue. Invenia ABUS is the only FDA-approved system for breast cancer screening when used in combination with mammography in women who have dense breast tissue and no prior interventions.

Ask your doctor if an Invenia ABUS screening would benefit you.

*FDA PMA P110006

