

CO-SPONSORSHIP MEMORANDUM

TO: All Legislators

FROM: Senators Rachael Cabral-Guevara, Jesse James, and LaTonya Johnson & Representatives Cindi Duchow, Amanda Nedweski, Nate Gustafson, and Lisa Subeck.

DATE: April 29, 2025

RE: Co-sponsorship of LRB-0466/1 and LRB-3021/1 – **relating to:** coverage of breast cancer screenings by the Medical Assistance program and health insurance policies and plans.

DEADLINE: Thursday, May 8, 2025 at 3:00PM

We are introducing LRB-0466 – “Gail’s Law” – to ensure that all Wisconsin women have access to the exams they need to catch breast cancer early, when it is most treatable. Gail’s Law requires health insurers to provide coverage, with no patient cost-sharing, for supplemental breast screening examinations for an individual who is at increased risk of breast cancer and diagnostic breast examinations for women requiring follow-up imaging due to an abnormality.

“Gail’s Law” is named in memory of Gail Zeamer, a fierce advocate for better access to breast cancer screenings who sadly passed away from metastatic breast cancer in June 2024. Gail was one of the [50% of women who have dense breast tissue](#), which makes women [4-6 times more likely to develop breast cancer](#) and can also hide tumors on traditional screening mammograms. Just one week after receiving a normal mammogram result, she was diagnosed with Stage 3C breast cancer.

Following her shocking diagnosis, Gail worked to pass [2017 WI Act 201](#), which requires Wisconsin women to be notified if their mammogram shows that they have dense breast tissue. While women are now empowered with information about their breast health, they continue to face barriers to accessing the secondary screenings they need since insurers are not required to provide these exams without cost-sharing. Currently, out-of-pocket costs for these exams can range from [\\$234 to over \\$1,000](#).

Wisconsin law already mandates coverage of screening mammograms. Gail’s Law updates the existing coverage requirement to ensure that all women have access to the life-saving exams they need and deserve. Research shows that a “prevention/early detection/treatment strategy” [costs 60% less](#) than a “treatment-only” approach. Additionally, patients face a [99% survival rate when their breast cancer is caught](#)

[early](#), at the localized stage, vs. [30% after breast cancer spreads to places like the lung, liver, and bone.](#)

Last session, there were concerns raised by the insurance industry regarding the recommendations for screening made by the U.S. Preventive Services Task Force (USPSTF). The USPSTF does not provide specific recommendations for women at higher-risk. Every organization that issues guidelines specific to higher-risk women recommends supplemental screening. Additionally, the USPSTF often lags behind other organizations in issuing recommendations. Until 2024, USPSTF said women didn't need screening mammograms until age 50. In its 2024 update, they finally began recommending mammograms start at 40, but only recommend them every other year (the biennial recommendation has been criticized by experts).

Please sign on to Gail's Law to honor Gail Zeamer's memory by joining the 28 other states with diagnostic/supplemental breast cancer screening laws. In testifying in support of this bill last session, Gail said:

"This bill unfortunately will not save my life, but I know it is so important in saving the lives of thousands of Wisconsin patients who will be diagnosed after me. It is not too bold to say that this bill is a matter of life and death."

LRB-0466 and LRB-3021 are supported by leading health organizations, including AdvaMed, the American Cancer Society Cancer Action Network, GE Healthcare, Medical College of Wisconsin, Rayus Radiology, Susan G. Komen, the Wisconsin Breast Cancer Coalition, the Wisconsin Primary Health Care Association, the Wisconsin Society of Plastic Surgeons, and the Wisconsin Radiological Society.

If you are interested in co-sponsoring this legislation, please reply to this e-mail or contact Representative Cabral-Guevara's office at (608) 266-0718, Representative Duchow's office at (608) 237-9197, or Representative Nedweski's office at (608) 237-9132 by 3:00PM on May 8, 2025. Co-sponsors will be added to both the Assembly and Senate versions of the bill unless specified otherwise.

Analysis by the Legislative Reference Bureau

This bill requires health insurance policies to provide coverage for diagnostic breast examinations and for supplemental breast screening examinations for an individual who is at increased risk of breast cancer, as determined in accordance with the most recent applicable guidelines of the National Comprehensive Cancer Network, or has heterogeneously or extremely dense breast tissue, as defined by the Breast Imaging-Reporting and Data System established by the American College of Radiology. Health insurance policies are referred to in the statutes as disability insurance policies. Self-

insured governmental health plans are also required to provide the coverage specified in the bill. The bill also requires coverage of those breast screenings by the Medical Assistance program, which is the state-administered Medicaid program that is jointly funded by the state and federal governments and that provides health services to individuals with limited financial resources.

Under the bill, health insurance policies may not charge a cost-sharing amount for a supplemental breast screening examination or diagnostic breast examination. The limitation on cost-sharing does not apply to the extent that the limitation would result in ineligibility for a health savings account under the federal Internal Revenue Code.

Health insurance policies are required under current law to cover two mammographic breast examinations to screen for breast cancer for a woman from ages 45 to 49 if certain criteria are satisfied. Health insurance policies must currently cover annual mammograms for a woman once she attains the age of 50. The coverage required under current law is required whether or not the woman shows any symptoms of breast cancer and may be subject to only the same exclusions and limitations, including cost sharing, that apply to other radiological examinations under the policy. The bill does not change or eliminate the current coverage requirements for mammograms, except that preferred provider plans are explicitly included in the current law and the bill's requirements.

This proposal may contain a health insurance mandate requiring a social and financial impact report under s. 601.423, stats.

For further information see the state fiscal estimate, which will be printed as an appendix to this bill.