What is the test/procedure? Molecular Breast Imaging is a new FDA cleared technology used for breast imaging as an adjunct to mammography. MBI identifies tumors in dense breast tissue that are often not visible with X-Ray based analog or digital mammography.

How long does the procedure take? Approximately 45 minutes.

How do I schedule an MBI for my patient? You can call Mercy's Centralized Scheduling at (319) 861-7778.

Is there any preparation for the procedure? No

What is the injection and is there any wait time associated with it? The patient is injected with a small radioactive tracer (TC-99m Sestamibi), which is commonly used in cardiac patients and can be immediately imaged following the injection, with no wait time.

What patients are ideal candidates for this test? There are four patient categories that include:
1. Women with dense breast tissue (40% of all women have dense breasts)
2. Diagnosis; irregular mammogram
3. Genetics/Family History (when Magnetic Resonance Imaging (MRI) cannot be performed)
4. Breast Cancer; extent (when MRI cannot be performed)

Why is MBI more beneficial for a patient than traditional imaging tests such as mammography and MRI? MBI allows the Radiologist to get functional imaging of the breast tissue, even when very dense. Since cancer can appear similar to normal, dense tissue, MBI will likely allow a diagnosis of breast cancer before the mammogram becomes abnormal.

Will insurance reimburse and if not, what is the estimated cost? Medicare is currently the only provider covering the cost of this exam for diagnostic purposes only. All others are self pay. The cost of the exam is $539. This fee includes the radioisotope, technical and professional (reading) components, all included in one fee. The Especially For You Fund is available for individuals who meet specific income guidelines.

Does Medicare pay 100% of $539 charge? No, patients will pay coinsurance unless they have a supplement to Medicare which many do.

Are insurance companies in other states paying for MBI procedures? If so, do you think will they eventually provide reimbursement here in Iowa? Yes, insurance companies (including Blue Cross/Blue Shield) cover the cost of this exam in surrounding states. Mercy will continue to work with insurance companies to expand coverage in Iowa.
What funding is available for patients that cannot afford to pay, but are ideal candidates? The Especially For You Fund is available for those that meet specific income requirements.

What are the income guidelines for the Especially for You Fund that could help pay for this exam? We are not able to publish the income guidelines, but encourage any patient with the inability to pay, to fill out an Especially For You application.

Is the charge still $539 if it is unilateral versus bilateral? Yes, the charge is $539, if both breasts are present. The MBI always studies both breasts, no matter which side is of most interest.

Can patients get set up on a payment plan for the $539 out of pocket charge? Yes

Is MBI covered through a patient's flex spending account? This varies by every plan so individuals will need to check their specific plan.

Is there a reduced rate if the patient has had a mastectomy of one breast? Yes, if the patient has had a mastectomy of one breast, the $539.00 fee would be reduced to $350. The exam to order is Molecular Breast Imaging LT-Mast MBIL MBI of left breast only if the right breast has been removed OR Molecular Breast Imaging RT-Mast MBIR MBI of right breast only if the left breast has been removed.

Will this replace mammography as a screening tool for women with dense breasts? No, at least not any time soon. There may still be findings on a mammogram which could prompt biopsy, even with a normal MBI.

Can you create a standing order that can be utilized if the test is recommended by a Radiologist, so I don’t have to e-File Share or fax another order? It was recommended that we hold off on adding it to our standing orders at this point in time.

Who in the community offers this service and how soon will it be available? Will RCI offer in the future? We are the only facility in the state of Iowa offering this technology, with the next closest being the Mayo Clinic. We are unsure if other facilities plan to invest in this technology.

If a Radiologist recommends this test, how will the process work? Will the Radiologist explain this to patient, and then call the patient’s primary physician for the order? In the diagnostic setting, where a woman meets with the Radiologist regarding her diagnostic mammogram and/or ultrasound results, the Radiologist will consult with any woman who would benefit from an MBI. The Radiologist would explain their rationale for the test, the cost and whether or not insurance would cover in her situation.

In the screening setting, where the Radiologist is reading through a stack of routine mammograms, there will be instances where an additional evaluation is necessary. If an MBI is the best test, the Radiologist or a Women’s Center nurse will call the primary care physicians office with this recommendation. The order needs to come from the primary provider; there are no standing orders for this procedure.

Is the test painful? No, it requires gentle compression (enough to stabilize the breast).

If a patient is already in a 6 month rotation for follow-up testing (based on abnormal findings with mammography), can the Primary Care Physician review their past mammogram, and if they have dense breasts, make a referral for an MBI instead of the testing already scheduled? It would be a best to consult with Dr. Hemann on a case by case basis prior to ordering an MBI.
If a physician identifies patients they feel are appropriate for MBI, but have not received a recommendation from a Radiologist, who can the physician consult with to determine if the patient meets criteria? If it is a Radiologist, are there particular ones they need to speak with? There are few contra-indications to MBI (age under 40, any woman taking Tamoxifen or other anti-estrogen drug) so that, if the Primary Care Provider feels their patient would benefit from MBI, they should go ahead and discuss this with her and order the procedure. (self pay rate, unless utilizing Medicare). Also, if still having regular menstrual cycles, the MBI should be obtained between days 4 and 10 of her cycle, with the first day of her menses considered day 1.

What is the accuracy for women who have implants? Implants do not hamper the MBI investigation, as long as the entire breast can be included in the field of view. Unlike with mammography, we do not need implant- displacement views for MBI.

When Mercy Genetic Counselors are completing risk assessments, and identifying candidates who would benefit from additional testing, do they contact the patient and primary care physician? Yes, they will send a letter with their recommendations to both patient and primary care physicians. If the woman has greater than 20 % life time risk of developing breast cancer, she might need a Magnetic Resonance Imaging (MRI) study. If her risk is above average, but less than 20%, she will likely benefit from MBI. Please refer to the following Q & A below for more information.

When Mercy genetic counselors are completing risk assessments, and identifying candidates who would benefit from additional testing, who is determining if MBI or MRI should be recommended? An MRI is the study of choice for the very high risk women and is recommended to be ordered by the PCP if patient meets lifetime risk of over 20%, or if they have a BRCA mutation themselves or 1st degree relative who has one. Genetic counselors are not currently recommending MBI unless MRI is denied for insurance purposes or if MRI is contraindicated for a specific reason. The recommendation of MBI for these patients will likely be evolving as established guidelines through National Comprehensive Cancer Network become available.

Can PCP’s order MBI if they know the patient has dense breasts and family history of breast cancer? Yes, an MBI can be ordered by the PCP, once it is established that the woman has had a mammogram, that her breasts are dense, and that she is at some degree of elevated risk for breast cancer.

Will Radiologists seeing patients at St Luke’s or RCI refer patients to Mercy for this test? Yes. This process is already in place.

Can the Mercy Women’s Center proactively review cases who are in six month follow-up and notify patients who are candidates? From a legal standpoint, (and so it does not appear as though Radiologist’s are self referring patients), Radiologist’s are recommending that PCP’s identify those patients in 6 month follow-up and forward a request form to Mercy Women’s Center for a Radiologist to identify if they would be an appropriate candidate for MBI.

Besides 6 month follow-up patients, what if there are other patients whom we feel would be good candidates for MBI, can we order through Central Scheduling? Yes an MBI can be ordered by the PCP, once it is established that the woman has had a mammogram, that her breasts are dense, and that she is at some degree of elevated risk for breast cancer. You can reach Mercy’s Centralized Scheduling at (319) 861-7778.
Does a woman need to have a baseline mammogram on file within the past 12 months before they can pursue an MBI, or can a baseline mammogram done more than 12 months ago be used? Rarely, a mammogram might reveal calcifications not obvious on the MBI, and for this reason a woman still needs an annual mammogram or otherwise, according to her age and risk factors. If it has been a year and she is over age 40, a mammogram should be obtained contemporaneously with the MBI.

Does a woman’s menstrual cycle play a role in scheduling an MBI, and if so, is there a preferred time period? Yes, MBI needs to be done during the follicular phase so scheduling between days 5 to 10 are best for a woman with a typical 28 day cycle. This allows the test to miss the spike in progesterone that occurs with ovulation. So if a woman knows that her cycle is shorter than average, she should be done between days 5 and 10, etc.

Here is the schematic for the menstrual cycle.

What is the interval between MBI exams? The interval between mammograms varies depending on the woman’s age, but any woman potentially needing an MBI exam needs a mammogram first. It is up to the provider to decide on this interval. They need to remember that MBI does not replace the mammogram; it is in addition to it.

For more information and videos on MBI, please go to [www.mercycare.org/mbiphysician](http://www.mercycare.org/mbiphysician), or contact Dr. Laura Hemann, MD, Medical Director of Mercy’s Women’s Center at (319) 398-6690