

Support the *Find It Early Act* and Require Insurers to Cover Breast Cancer Screening and Diagnostics with No Cost-Sharing



Based on a range of risk factors, many women require screening and diagnostic services beyond mammography to diagnose their breast cancer.

The **Find It Early Act of 2022** would ensure that all health insurance plans cover (with no cost-sharing):

- Screening and diagnostic mammograms
- Breast ultrasounds and MRIs

This includes health plans offered on the individual and group markets, employer-sponsored plans regulated by ERISA, Medicare, Medicaid, TRICARE, and the Veterans Health Administration.

By championing the Find It Early Act, legislators could eliminate the “hidden costs” of a breast cancer diagnosis.



39,611,162 mammography procedures reported in 2022 ¹	10% of screening mammograms find something abnormal ²	43% of women aged 40-74 have dense breasts ³	1 in 400 people have BRCA gene mutations ⁴
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Diagnostic breast imaging is a crucial step in the diagnosis and treatment of breast cancer.

Women with an abnormal mammogram and/or risk factors including dense breast tissue or family history often need additional screening to determine or rule out a cancer diagnosis. Screenings can include diagnostic mammography, ultrasound, or MRI.

These tests are critical for diagnosis, but they are not currently subject to the Affordable Care Act’s (ACA) preventive services coverage requirement.

- The ACA requires insurers to cover the costs of screening mammograms, but only **14 states and the District of Columbia** require partial or full reimbursement for breast ultrasounds or MRIs.



¹ Center for Devices and Radiological Health. (2023, January 3). MQSA National Statistics. U.S. Food and Drug Administration. Retrieved from <https://www.fda.gov/radiation-emitting-products/mqsa-insights/mqsa-national-statistics>

² Rosenberg RD, Yankaskas BC, Abraham LA, et al. Performance benchmarks for screening mammography. *Radiology*. 2006;241:55–66.

³ Sprague BL, Gangnon RE, Burt V, Trentham-Dietz A, Hampton JM, Wellman RD, Kerlikowske K, Miglioretti DL. Prevalence of mammographically dense breasts in the United States. *J Natl Cancer Inst*. 2014 Sep 12;106(10):dju255. doi: 10.1093/jnci/dju255. PMID: 25217577; PMCID: PMC4200066.

⁴ Petrucelli, N., Daly, M. B., & Pal, T. (2022, May 26). BRCA1- and BRCA2-Associated Hereditary Breast and Ovarian Cancer - GeneReviews® - NCBI Bookshelf. BRCA1- and BRCA2-Associated Hereditary Breast and Ovarian Cancer - GeneReviews® - NCBI Bookshelf. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK1247/>

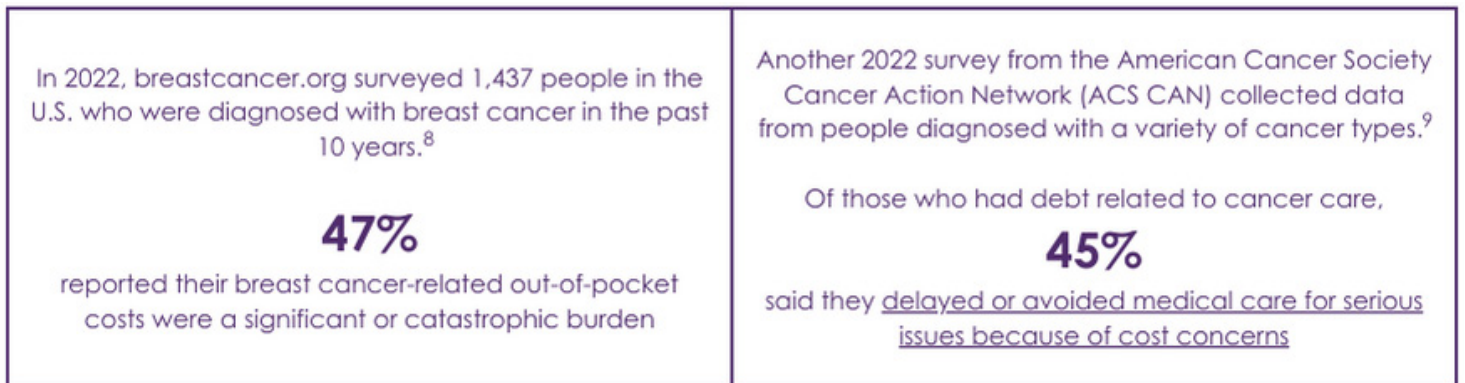
⁵ Kaiser Family Foundation. (2019, September 26). Coverage of Breast Cancer Screening and Prevention Services. KFF. Retrieved from <https://www.kff.org/womens-health-policy/fact-sheet/coverage-of-breast-cancer-screening-and-prevention-services/>

What is cost-sharing?

Cost-sharing includes terms like deductibles, coinsurance, and copayments. These are the share of costs covered by your insurance plan that you pay out of your own pocket. Cost-sharing does not include premiums (except for Medicaid and Children's Health Insurance Program [CHIP]), balance billing amounts for non-network providers, or the cost of non-covered services.⁶

Cost-sharing and other out-of-pocket costs delay lifesaving breast care

Recent interest in expanding the use of premiums and cost-sharing in Medicaid is built upon the premise that doing so will increase personal responsibility, prepare the insured to transition to commercial and private insurance, and support consumers in making value-conscious health decisions. However, research shows these beliefs to be false. Cost-sharing—even at relatively low levels—is associated with reduced use of care, including necessary services.⁷



Delaying breast care can have dire consequences.

- Delays have been associated with higher breast cancer mortality among symptomatic breast cancer patients of 12 or more weeks prior to presentation.¹⁰
- The amount of time leading up to breast surgery among women with invasive early-stage breast cancer impacts its treatability.¹¹



The Find It Early Act will ensure that women will never have to compromise their breast health—or their lives—because they cannot afford preventive breast care.

⁶ U.S. Centers for Medicare & Medicaid Services. (n.d.). Cost sharing - Glossary. Healthcare.gov. Retrieved from <https://www.healthcare.gov/glossary/cost-sharing/>

⁷ S., Ubri, P., & Zur, J. (2017, June 1). The effects of premiums and cost sharing on low-income populations: Updated review of Research Findings. KFF. Retrieved from <https://www.kff.org/medicaid/issue-brief/the-effects-of-premiums-and-cost-sharing-on-low-income-populations-updated-review-of-research-findings/>

⁸ Breastcancer.org. (2022, November 11). Survey finds nearly half of people with breast cancer report serious financial burdens. Retrieved from <https://www.breastcancer.org/managing-life/covering-cost-of-care/cost-of-care-report/survey-results>

⁹ American Cancer Society. (2022, March 16). Survivor Views: Cancer & Medical Debt. American Cancer Society Cancer Action Network. Retrieved from <https://www.fightcancer.org/policy-resources/survivor-views-cancer-medical-debt#:~:text=In%20line%20with%20recent%20national,their%20credit%20score%20negatively%20impacted>

¹⁰ Richards MA, Smith P, Ramirez AJ, et al. The influence on survival of delay in the presentation and treatment of symptomatic breast cancer. *Br J Cancer*. 1999;79:858–864.

¹¹ Vujovic O, Yu E, Cherian A, et al. Effect of interval to definitive breast surgery on clinical presentation and survival in early-stage invasive breast cancer. *Int J Radiat Oncol Biol Phys*. 2009;75:771–774.