



# Breast Cancer and the Health Care Law

## Ensuring access to breast cancer early detection and treatment

This year, an estimated 232,000 women in America will be diagnosed with breast cancer and about 40,000 will die from the disease, making it the second leading cause of cancer death in women. The 5-year relative survival rate is 98 percent when breast cancer is detected at an early stage and only 24 percent for late-stage disease. Cost and lack of insurance are significant barriers to getting preventive care.

Only 17 percent of women age 40 and over who are uninsured or underinsured received a mammogram in the past year, compared with 55 percent of adequately insured women. Even for women with private health insurance or Medicare, relatively small out-of-pocket costs can significantly reduce mammography rates, particularly for underserved populations.

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### Ensuring access to evidence-based cancer screenings and treatment is critical to the fight against breast cancer.

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#### Highlights of Breast Cancer Screening in the Health Care Law

The health care law improves coverage for evidence-based breast cancer prevention and treatment by requiring health plans to cover mammograms and other recommended preventive services, and by making health coverage more accessible for women. The health care law also helps ensure that people who have been diagnosed with breast cancer get the quality, affordable health care they deserve.

#### Provisions of the health care law:

- Ensure that individuals with a history of breast cancer are no longer denied coverage because of a pre-existing condition. *(Effective beginning 2014 for most plans)*
- Prohibit the sudden discontinuation of coverage because a patient is diagnosed with breast cancer or another health condition. *(Effective beginning 2014)*
- Prohibit the use of annual dollar limits on coverage and lifetime limits that leave cancer patients without coverage. *(Effective beginning 2014)*
- Require that all commercial health insurance plans cover mammograms for women starting at age 40 and cover BRCA1 and BRCA2 genetic testing and counseling for women who have a family history of breast and ovarian cancer. *(Rollout for new plans began 2010; most group and individual plans by 2014)*
- Ensure that mammograms and other proven preventive services are administered at no cost to patients. *(Effective as of 2011 in Medicare; effective in 2010 for new plans and 2014 for those newly eligible for Medicaid)*
- Create a national prevention and public health fund to expand and sustain national investment in prevention and public health programs, including health screenings. *(Effective as of 2010)*
- Establish public education campaigns on young women's breast health. *(Effective as of 2010)*

#### Implications for the American Cancer Society and the American Cancer Society Cancer Action Network (ACS CAN)

- ACS CAN is working to ensure that critical provisions of the health care law are implemented as strongly as possible for people with cancer and their families.
- ACS CAN will continue to fight for funding for the National Breast and Cervical Cancer Early Detection Program, which provides a critical service to medically underserved women.