

More than a million women could gain access to potentially life saving tests for cancer

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A study by researchers at the George Washington Center for Health Policy Research at SPHHS who University School of Public Health and Health Services (SPHHS) indicates that full implementation of the Affordable Care Act would expand health insurance coverage for more lowincome women, enabling more than a million women to obtain potentially life-saving screening for breast and cervical cancer. The study, "Health Care Reform and Women's Insurance Coverage for Breast and Cervical Cancer Screening," was published in a recent issue of the journal Preventing Chronic Disease.

In the past, many low income women without insurance could not afford screening tests for breast and cervical cancer such as mammograms or Pap tests. Such tests often identify cancer at an early, more treatable stage—before a tumor has spread and turned deadly. Right now, about 40,000 women per year die of breast cancer and another 4,000 die of cervical cancer.

The researchers created a model, based on results from Massachusetts' successful health reform initiative, to estimate the number of low-income women in every state who would gain insurance coverage if federal health reform is fully implemented. They estimated that 6.8 million lowincome women 18-64 would gain health insurance under health reform. Based on findings from a recent experiment of expanded Medicaid coverage for low-income adults, they estimated that about 500,000 more women a year would be able to get mammograms to check for breast cancer and 1.3 million more women could get Pap tests to check for cervical cancer.

"The Affordable Care Act could lead to major gains in screening and early detection of breast and cervical cancer," said Leighton Ku, PhD, MPH, a professor of health policy and Director of the

led the study. "Those gains could result in faster treatment and better outcomes for women across the nation," he said adding that the improvements come after a decade in which women's cancer screening rates have remained stagnant.

Even so, 4.5 million low-income women will remain uninsured and could have great difficulty affording cancer screening costs on their own, the authors said. They note that such women will continue to need the help provided by the Center for Disease Control and Prevention's breast and cervical cancer screening program, which offers uninsured, poor women access to screening tests and even referrals for follow-up care if a cancer is found.

"The CDC's breast and cervical cancer program serves as a lifeline helping hundreds of thousands of uninsured women get the screening services they need," said Paula Lantz, PhD, professor and chair of the SPHHS Department of Health Policy and a noted women's health expert. Moreover, almost all states offer Medicaid coverage for cancer treatment if they are diagnosed under the CDC program.

The research study assumed that the Affordable Care Act is fully implemented. However, the Supreme Court ruled in June that the expansion of Medicaid, a major component of the federal reform law, must be optional for states and governors in states like Florida, Texas, Nebraska, Georgia, Louisiana, South Carolina and Mississippi have said they would resist Medicaid expansion. States that fail to expand health insurance coverage would be unlikely to experience these improvements in women's <u>health insurance coverage</u> and <u>cancer</u> screening rates, Ku said.

More information: A copy of the paper may be



found at: sphhs.gwu.edu/departments/heal ... lications/Preventing%20Chronic%20Disease.pdf

Provided by George Washington University

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