

THE PINK PAPER

Detect to Protect: Breast Cancer Screenings Save More Than Lives

Why Early Detection is the Most Proactive and Cost-Saving Approach to Breast Cancer

Early detection bills for breast cancer prioritize access to life-saving screenings and diagnostic testing to ensure cancer is caught early, when it is localized and treatable. They aim to reduce cost-sharing and provide additional, comprehensive scans for people with dense breasts or a genetic predisposition to or family history of breast cancer. Although not perfect, recent legislation at the state and national levels has made significant strides in expanding coverage and saving lives through preventive care.

As of now, **over 30 states** have enacted legislation that removes barriers to access to diagnostic and supplemental scans, from across the political spectrum. Colorado, Arkansas, Florida and New York are just a few examples.¹ However, these can only affect private plans and does not impact the vast majority of Americans covered under self-funded plans, out of state plans or federal plans, which include high-deductible plans, VHA, Medicare and Tricare.

Recent bills at the national level have tried to close the gaps. The *Find it Early Act* and the *Nancy Gardner Sewell Act* have both been introduced in the Senate. The *Find It Early Act* aims to require insurance coverage for additional breast cancer screenings (like ultrasounds and MRIs) for women with dense breasts or high risk, while the *Nancy Gardner Sewell Act* would allow Medicare to cover FDA-approved multi-cancer early detection (MCED) tests.

However, both bills have stalled. Now is the moment to make bipartisan progress and save lives. **We believe our success in Ohio provides a model.**

Without any opposition testimony, our House passed HB 371 in 2022 to make sure insurance companies would cover breast cancer screenings for Ohioans of any age. Building on this, HB 271, the *BEST (Breast Examination and Screening Transformation) Act*, is currently being discussed in the House. It expands this coverage and eliminates cost-sharing. Ohio's bipartisan efforts have passed one bill and led us to the verge of another success. In our conversations with lawmakers, several arguments have been key. This **National Pink Paper** presents the economic and social imperative that exists to pass comprehensive, national early detection legislation.

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7,568

fewer cases late-stage diagnoses mean more lives saved when out-of-pocket costs for follow-up screening nationwide are removed.



\$2.2 Billion

saved annually in healthcare costs.



One in Four

Americans with medical debt face bankruptcy or eviction.

Early Detection Saves Lives and Money for Taxpayers and Insurers

Investing in Early Detection Lowers Both Human and Financial Tolls.

A new study from the **American Cancer Society Cancer Action Network (ACS CAN)** estimates that removing out-of-pocket costs for follow-up screening nationwide could **prevent 7,568 cases of late-stage breast cancer each year**. It could also save the U.S. healthcare system **\$2.2 billion annually** by eliminating financial barriers after an abnormal mammogram.²

The Financial Toll of Breast Cancer is Crippling.

According to a **2022 BreastCancer.org survey**³:

- **64%** of women saw job disruptions due to breast cancer.
- **50%** reported career setbacks.
- **47%** faced a “significant or catastrophic” out-of-pocket burden.
- **37%** cut back on food or housing to pay for care.
- **35%** used all or part of their savings to pay for cancer care.
- **28%** relied on credit cards.
- **21%** skipped medications to save money.

The Risks Go Deeper.

- **1 in 4 Americans** with medical debt faced **bankruptcy or eviction**.⁴
- Cancer patients are **71% more likely** to suffer a severe financial event.⁵

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Why the Insurance Industry should Jump on this Opportunity that will Save Lives and Millions

Data Proves that there are Benefits – even for Insurers

Our only data on the costs in different stages of treatment is outdated. **The last time that the National Institutes of Health (NIH) looked at the cost of care for breast cancer stage by stage was in 2016 (see figure 1), and we did not yet have the new medicines that prolong life, immunotherapy, or precision medicine, which have further increased costs.**⁶ Now, we have the only government study (out of Canada) that shows a tenfold increase in the cost difference between breast cancer caught early and at stage 4 (see figure 2).⁷

Cancer Stage	Average Treatment Cost
stage 0	USD \$60,637
stages 1 & 2	USD \$82,121
stage 3	USD \$129,387
stage 4	USD \$134,682

figure 1

Cancer Stage	Average Treatment Cost
stage 1	CAD \$39,263
stage 2	CAD \$76,446
stage 3	CAD \$97,668
stage 4	CAD \$370,398

figure 2

Legislative bills that champion access to early detection screenings highly likely avert financial disasters that are coming not only for the patients who cannot meet the costs of this care, but also for the insurance companies and taxpayers who must step in and cover the cost of what may well be years of treatment. These are individuals unable to work who need to be taken care of by loved ones. Statistics do not take into account the indirect impact on those who would have been contributing to our state's economic well-being, but for the burden of caring for a late-stage breast cancer patient.

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In addition, according to a 2023 study in Canada, later stage costs were as high as **CAD \$516,415 per case that year.**⁸ Canada puts limits on drug costs, in contrast to the U.S., with its increasing drug costs and inflation. This results in a conservative estimate of **8-10% of stage-4 diagnoses each year, equivalent to 26,000 to 32,000 women**, facing late-stage treatment costs of around **USD \$500,000**, or **USD \$13 to 16 billion in total costs each year.**

These costs continue, and these women are mostly incurable. Why should mothers and wives, insurance companies, and the taxpayer pay extortionate costs, just for these women to lose their lives? This is about saving money, while saving lives. It is that simple.



Up to 32,000 Women

who have been diagnosed with stage 4 breast cancer will face astronomical late-stage treatment costs that will feed into the **\$13 to 16 billion in total costs** each year for all stage 4 women across the country.

The Broader Economic Impact: Missed Screenings, Missed Potential

According to **Chmura Economics**, in **2024**, the **total cost of breast cancer care** is estimated at **\$32.7 billion**, with **\$28.8 billion** in medical services and **\$3.9 billion** in prescription drugs.⁹

By **2030**, the cost of **metastatic breast cancer** alone is projected to **more than double to \$152.4 billion** according to the **University of North Carolina Center for Health Promotion and Disease Prevention.**¹⁰

Missed screenings mean missed work. Employers bear rising health costs when cancer is detected late. Nomi Health warns that "every missed screening carries a price tag."¹¹

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Cancer care accounts for almost **15%** of all employer healthcare costs.



\$18 Billion

in lost productivity each year.



\$1 Trillion

economy boost each year by 2040.

In fact, **cancer care accounts for nearly 15% of all employer healthcare costs**, despite making up just 1% of claims.^{12 13} This massive discrepancy means a single cancer diagnosis can sharply drive up deductibles and premiums for an entire workforce, imposing a financial shock on both businesses and employees.

Since 2009, cancer has consistently been **the top cause of catastrophic medical claims** among self-funded employers.¹⁴ This disproportionately affects small and mid-sized businesses that lack the financial cushion to absorb such events.

“Every missed screening carries a price tag—one that affects both your healthcare costs and your employees' lives.” —Nomi Health

Furthermore, breast cancer patients are forced to miss work, as metastatic breast cancer alone results in **more than \$18 billion in lost productivity every year** in the U.S.¹⁵

Another recent study found that when the indirect and direct costs are added, including the lost productivity in later stages and the unnecessary deaths, early detection and treatment cost savings are extraordinary.¹⁶ **According to a 2024 McKinsey Health Institute report, improving women's health outcomes could boost the U.S. economy by \$1 trillion per year by 2040 and allow the equivalent of 137 million women to fully participate in the labor market.**¹⁷

Screenings and preventative care are the most effective counter to this huge cost burden on small businesses and employer health plans.

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We Need to Make Bipartisan Progress and Pass Early Detection Legislation

This year, an estimated **319,750 Americans** will hear the words: “You have breast cancer.”^{18 19} Breast cancer remains **one of the leading causes of cancer-related death**, touching every corner of our society from families and communities to businesses and the broader economy.²⁰

With today’s medical advances, we have the tools to change the odds. *One in eight* should no longer be our reality. It should be *zero in eight*. But for far too many, the cost of additional screenings stands between early detection and late-stage diagnosis. That financial barrier doesn’t just affect patients, it ripples through the workforce, strains insurance systems, and undermines productivity and wellbeing.

We have a choice: invest in prevention or pay the price of delay. That’s why we must pass legislation that guarantees access to early detection, empowering every individual to take action before breast cancer advances. When we catch cancer early, we save lives, protect livelihoods, and strengthen our collective future.

Why Work with the Pink Eraser Project?

Pink Eraser Project’s Founding Executive Director Michele Young **helped lead a nationwide push during the US Preventive Services Task Force (USPSTF) comment period**, urging the Task Force to update its breast cancer screening guidelines to reflect the different needs of women with dense breasts. A leading radiologist created a comment template that could be copied and submitted directly from the website, and top radiologists and oncologists were invited to join the effort and flood the USPSTF with evidence-based feedback. Michele’s team tracked **thousands of submissions** from across the country.

At the same time, Congresswomen Rosa DeLauro and Debbie Wasserman Schultz mounted their own strong, independent effort. **Together, these coordinated and grassroots actions likely contributed to a separate federal task force ultimately updating the guidelines to align more closely with current science.**

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Michele is proud to have played a role in this ongoing work to ensure women with dense breasts receive screening that reflects their true risk.

Michele's advocacy has also brought together physicians, survivors, and politicians. This resulted in the signing of H.B. 371, coined the Breast Cancer Bill, into law in Ohio in 2022, requiring coverage from private insurance and Medicaid for mammograms, while also mandating additional screenings for women with dense breasts.²¹

Months after playing a pivotal role in passing H.B. 371 and prior to launching the Pink Eraser Project®, Michele sat down with Katie Couric, an award-winning journalist and #1 New York Times bestselling author, to discuss how she is beating breast cancer and changing the breast cancer screening system.²²

Their conversation later **inspired the *Find It Early Act***, a federal bill that would ensure women have access to earlier detection of breast cancer by addressing insurance barriers to those screenings.

The Pink Eraser Project exists to erase breast cancer before it becomes visible. It advocates for a transformation in how we detect, understand, and intercept disease at its earliest point using advanced imaging, molecular monitoring, personalized interventions, and AI technologies. We are supporting the research of the doctors making this vision a reality and providing hope to breast cancer patients across the world. Our advocacy, research, education, and fundraising efforts this year are all dedicated to a landscape of cancer care that prioritizes early, targeted action and improves outcomes for all patients.

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Resources

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Resources Continued

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