

## Payers versus Breast Cancer Awareness Month (Part 2)

### Background

While breast cancer screening is vital at all times, it is given special attention during October, when our nation honors Breast Cancer Awareness Month. As the Susan G. Komen Foundation states, “Breast cancer screening and early detection play an important role in your health. Screening tests can help detect breast cancer at an early stage when the chances of survival are highest.” This is crucial, particularly given the prevalence of breast cancer: every year, nearly a third of all newly diagnosed women have breast cancer, which strikes an estimated 1-in-8 American women at some point in their lives. That’s why the mammogram – an X-ray image of the breast – is so important. According to the CDC, “Doctors use a mammogram to look for early signs of breast cancer. Regular mammograms can find breast cancer early, sometimes up to three years before it can be felt.” And yet, **some payers are making it difficult for patients to have timely access to mammograms.**

### Payers Are Denying Coverage for Breast Cancer Screening

A recent AFHC [Impact Alert](#) revealed documented evidence of payers denying coverage for breast cancer screenings, contending they were provided by out-of-network clinicians. Such out-of-network status is often the result of payer action, however. As detailed in AFHC’s [national survey](#) of more than 48,000 clinicians, 36% of contracts have been terminated and payment rates have been slashed an average of 52% since the federal *No Surprises Act* (NSA) has been implemented. Additionally, payers are denying coverage for breast cancer screenings of women and men delivered at in-network facilities, even though they are protected by the NSA.

Compounding this crisis is the impact of payer abuse on the timeliness of mammogram screenings. Due to payers’ rate cuts and contract terminations, patient access to radiologists has suffered as network contraction – especially but not solely in rural communities – has occurred. The resulting backlogs have led to excessively long scheduling delays and screening wait times, as illustrated by the documented example below. Just as troubling, this trend has dire consequences: according to a 2021 study in [Journal Radiology](#), women face a **50% greater risk of dying from breast cancer** if they are unable to access routine screening mammograms.

#### Screening Mammograms

Days to Schedule: **127 days**

Average Wait Time: **53 days**

#### Diagnostic Mammograms

Days to Schedule: **24 days**

Average Wait Time: **43 days**

(Supporting documentation for this and numerous other examples is available upon request.)