

Breast Cancer Disparities Among Women in Virginia: The facts, understanding the challenges, and opportunities to eliminate them.

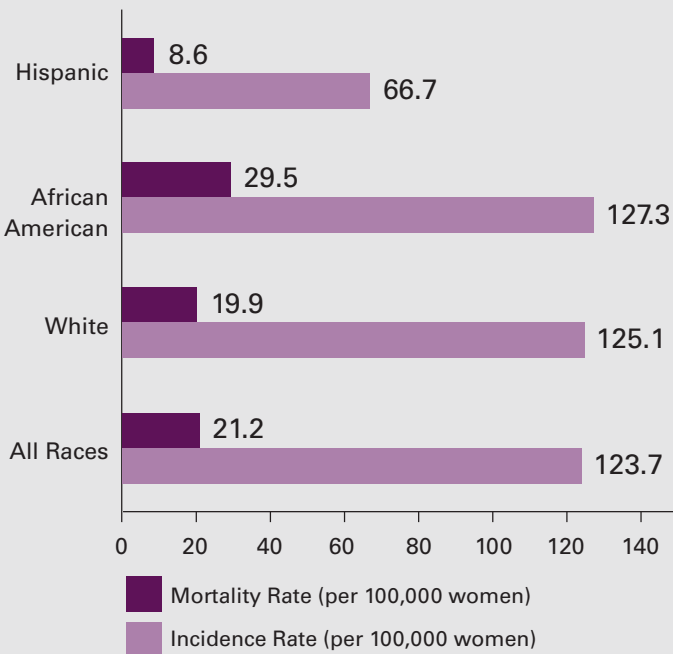
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Breast cancer is the second leading cause of cancer death in women.¹ About 40,000 women in the U.S. die of breast cancer every year. In Virginia, breast cancer claims the lives of more than 1,000 women annually.² However, incidence and mortality rates of breast cancer vary widely across socioeconomic and racial/ethnic groups due in large part to disparities in breast cancer screening and treatment across these populations.

The Facts

In Virginia, African American women are more likely to be diagnosed with and die from breast cancer than White women. Further, uninsured women are less likely to receive recommended mammography screening than insured women by 26.6 percentage points. Rates for recommended mammography screening in low-income women³ lags behind screening for high-income women⁴ by 15.2 percentage points.

Mortality and Incidence Rate of Breast Cancer in Virginia (2012 CDC)



Understanding the challenges

To understand the challenges of breast cancer screening and treatment for underserved women, semi-structured interviews were conducted with several key providers and advocates for breast cancer care in Virginia (see box). Critical determinants of breast cancer disparities identified by providers and advocates included:

- Insufficient funding allows some providers to screen only 6–7% of eligible women.
- Failing to expand Medicaid has resulted in uninsured and low income women postponing or failing to receive cancer screening and treatment.
- Underinsured women and those who are insured but cannot pay copayments or deductibles, cannot afford diagnostic mammograms, which are needed to diagnose unusual changes in the breast.
- Follow-up for rescreening is difficult because uninsured and low-income women may not have a permanent address.
- Timely screening and treatment is delayed because of cultural and language barriers.
- Participation of minorities in clinical trials is very low.
- Barriers in rural areas, where many women that are most impacted by disparities live, include low literacy levels, difficulty accessing care due to a lack of primary care physicians and hospital closures, a preponderance of undocumented immigrants with limited coverage and treatment options.

How do recent health reforms affect disparities?

The Health Insurance Marketplace offers subsidized insurance plans for individuals with income between 100–400% federal poverty level (FPL). In states that expanded Medicaid, women with income below 138% FPL are eligible for Medicaid coverage. However, low-income women living in states like Virginia that did not expand Medicaid



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Significant challenges to reduce breast cancer disparities include: Limited funding, underinsurance, poor follow-up, cultural and language barriers.

may fall into a “coverage gap” if their annual household income is below 100%. Many of these women are not eligible for Medicaid coverage or subsidies to purchase health insurance from the Marketplace. Therefore, about 1.5 million⁵ women living in states that did not expand Medicaid who fall in the coverage gap remain uninsured and cannot afford diagnostic mammograms or treatment. Of these, 81,220 women live in Virginia.

Opportunities to eliminate breast cancer disparities

- Increase funding for community programs to provide breast cancer screening to low-income women.
- Increase health insurance coverage for uninsured and low-income individuals.
- Increase participation of minorities in clinical trials that would allow them to have access to new treatments.
- Encourage primary care physicians to educate low-income women about the importance of regular screenings.

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¹<http://www.cancer.org/cancer/breastcancer/detailedguide/breast-cancer-key-statistics>

²<http://www.vbcf.org/about-breast-cancer/breast-health-basics>

³annual household income <\$15,000

⁴annual household income ≥ \$50,000

⁵<http://kff.org/health-reform/issue-brief/the-coverage-gap-uninsured-poor-adults-in-states-that-do-not-expand-medicaid-an-update/>

⁶<http://www.vdh.virginia.gov/OMHHE/healthequity/MHAC.htm>

Key Providers of Breast Cancer Care for Low Income Women in Virginia

Several organizations in Virginia provide free or low cost breast cancer screening and treatment. These key providers are essential in the Commonwealth's efforts to reduce breast cancer disparities. Elimination of health disparities (including cancer disparities) is one of the main priorities of the Virginia Commissioner's Advisory Council on Health Disparity and Health Equity group, which works with the Department of Health and other stakeholders in Virginia to ensure health equity for minorities⁶. The following providers and advocacy organizations were interviewed for this brief.

The National Comprehensive Cancer Control Program (Every Woman's Life)

Every Woman's Life (EWL) has more than 30 providers across Virginia. They provide free mammogram screening for uninsured, low-income women in Virginia. EWL collaborates with other organizations such as Susan G. Komen Central Virginia and Cross Over Ministry, which provide low-cost or free mammograms. Women diagnosed with cancer through EWL may be eligible to receive treatment services through Medicaid.

The Rural Cancer Outreach Program at Massey Cancer Center

Oncologists and nurses from Massey Cancer Center work with primary care doctors to provide cancer care services to low-income women in rural areas. These services include evaluation, follow up, and referral of patients diagnosed with cancer to Massey Cancer Center. In addition, the Rural Cancer Outreach Program organizes awareness events to educate women about the importance of breast cancer screening.

Virginia Breast Cancer Foundation (VBCF)

VBCF educates Virginians on breast cancer and advocates for patients. VBCF distributes bilingual educational materials, provides small grants to local libraries for educational materials, and organizes volunteer trips to the Virginia General Assembly and United States Congress to advocate for breast cancer policies. VBCF has successfully advocated for the 2012 Breast Density Notification Law, Medicaid coverage for mammography, increased funding of cancer centers at Virginia Commonwealth University and University of Virginia, and other important policies to reduce gaps in the detection and treatment of breast cancer.