

NATIONAL BREAST & CERVICAL CANCER EARLY DETECTION PROGRAM FY 2018 APPROPRIATIONS FACT SHEET CENTERS FOR DISEASE CONTROL AND PREVENTION

FY 2016	FY 2017 President's	FY 2017 House	FY 2017 Senate	FY 2018 Request
	Budget			
\$206,993,000	\$169,204,000	\$210,000,000	\$210,000,000	\$275,000,000

CDC's National Breast and Cervical Cancer Early Detection Program (NBCCEDP) is the only nationally organized breast and cervical cancer screening program in the United States. Currently, programs funded through the NBCCEDP serve approximately 10.6% of NBCCEDP-eligible women aged 40–64 years for breast cancer, and 6.5% of eligible women aged 18–64 years for cervical cancer. With the suggested increase, funding would be used to identify and screen hard to reach, uninsured, or underinsured women. Funds would also be used to eliminate barriers to screening for insured women by increasing the use of strategies that enable more organized systems of care such as patient navigation and case management, public education and awareness, targeted outreach, and efforts to ensure quality screening and diagnostic follow up.

Basic Facts about Breast and Cervical Cancer

In 2012, 224,147 women in the U.S. were diagnosed with breast cancer and 41,150 women died from the disease. 12,042 women were diagnosed with cervical cancer and 4,074 women died. Screening increases the likelihood of finding breast and cervical cancers at earlier stages when they are more treatable. Early detection and follow-up can prevent virtually all cervical cancer deaths and reduce breast cancer deaths by 16% in women over age 40. It is estimated that over \$8 billion per year is spent in the U.S. for the treatment of breast cancer, and over \$3 billion per year on the treatment of cervical cancer. Mammography screening every two years extends life for women aged 65 or older at a cost of about \$36,924 per year of life saved. Cervical screening every three years extends life at a cost of about \$5,392 per year of life saved.

In 2014, the NBCCEDP:

- Screened 298,726 women for breast cancer with mammography and diagnosed 5,312 breast cancers.
- Screened 179,533 women for cervical cancer with the Pap test and diagnosed 236 cervical cancers and 7,873 premalignant cervical lesions, of which 38% were high-grade.

CDC's National Breast and Cervical Cancer Early Detection Program (NBCCEDP)

NBCCEDP provides access to breast and cervical cancer screening and diagnostic services to low-income, uninsured and underserved women in all 50 states, the District of Columbia, 5 U.S. territories, and 11 tribes. Since the beginning of the program in 1991, the program has provided more than 12 million breast and cervical cancer screening examinations, and diagnosed more than 67,959 breast cancers, 3,715 invasive cervical cancers, and 171,174 premalignant cervical lesions, of which 40% were high-grade. In addition to providing direct screening, programs also include evaluation, public and provider education, outreach, patient navigation/case management, follow-up, and quality assurance.

While the Affordable Care Act increased insurance coverage for millions of women, estimates show that more than 5.7 million women will remain uninsured and eligible for breast or cervical cancer screenings through the NBCCEDP. Since the implementation of ACA, CDC has been working to expand activities that will increase population level screening rates, while continuing to provide screening services to those who continue to be program eligible. The NBCCEDP, with a network of over 11,000 primary care clinics, is uniquely positioned to work with health systems to implement initiatives that increase screening among both the newly insured and those who remain un- and under-insured.

The NBCCEDP can support widespread participation in screening and targeted outreach to underserved communities with a heavier cancer burden, and the population of insured women who are in need of screening. NBCCEDP provides enhanced support for evidence-based public health approaches such as public education and outreach, clinical services and care coordination, quality assurance.

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