

# POLICY RECOMMENDATIONS: **BREAST CANCER**

**ORANGE COUNTY WOMEN'S HEALTH POLICY SUMMIT**  
OCTOBER 17, 2014

# TASK FORCE BACKGROUND

LAUNCHED: March 2013

CO-LEADS: CSU Fullerton, Susan G. Komen OC  
and OCWHP

ENGAGED: Diverse array of organizations

TO ADDRESS:

- ✓ Screening Disparities
- ✓ Diagnostic Gap for women < 40

# BREAST & CERVICAL CANCER TASK FORCE

## PARTICIPANTS:

- CSU Fullerton
- Health Management Associates
- Hope Wellness Center
- MOMS Orange County
- OC Asian & Pacific Islander Community Alliance (OCAPICA)
- OC Department of Education
- OC Health Care Agency
- OC Women's Health Project
- Pacific Islander Health Partnership (PIHP)
- Susan G. Komen OC
- The G.R.E.E.N. Foundation
- Jacqueline Tran, DrPH, MPH Consultant
- UC Irvine
- Vietnamese American Cancer Foundation (VACF)
- YWCA of North Orange County

# BREAST CANCER OVERVIEW

1 IN 8 U.S. WOMEN

IMPORTANCE OF EARLY DETECTION

SCREENINGS (CBE, Mammogram)

- HP2020: Increase 10% (from 74% to 81%)
- Conflicting guidelines re: age to begin

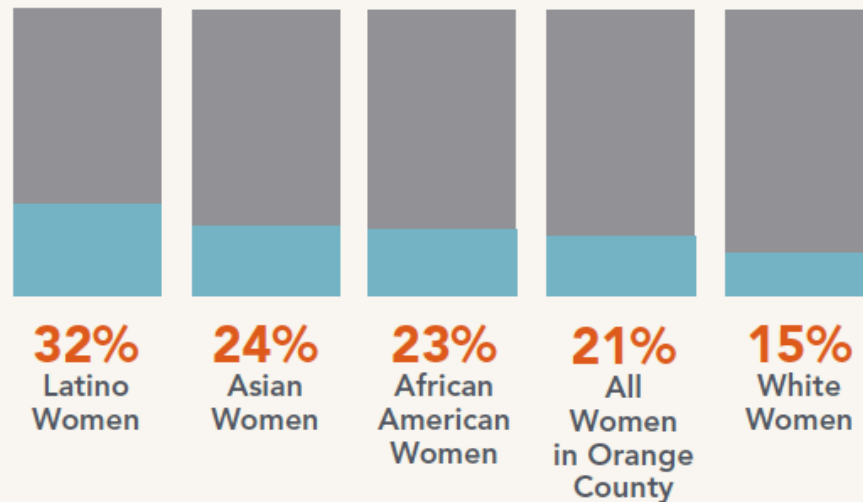
DIAGNOSTICS (Mammogram, MRI, Ultrasound, Biopsy)

TREATMENT

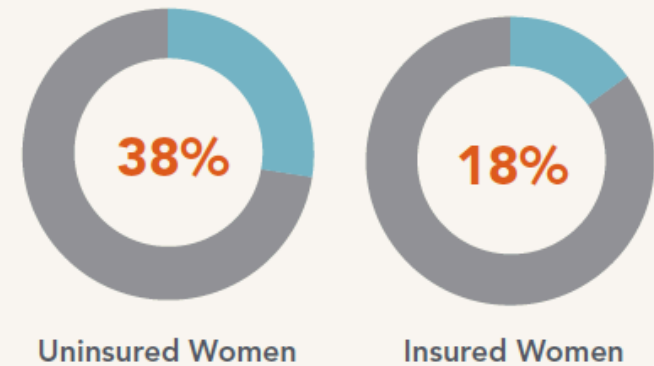
# SCREENING DISPARITIES IN OC

Table 2. **MAMMOGRAM SCREENING BY RACE AND INSURANCE STATUS IN ORANGE COUNTY (2011-2012)**

Percentages of women in Orange County that have never had a mammogram by RACE:

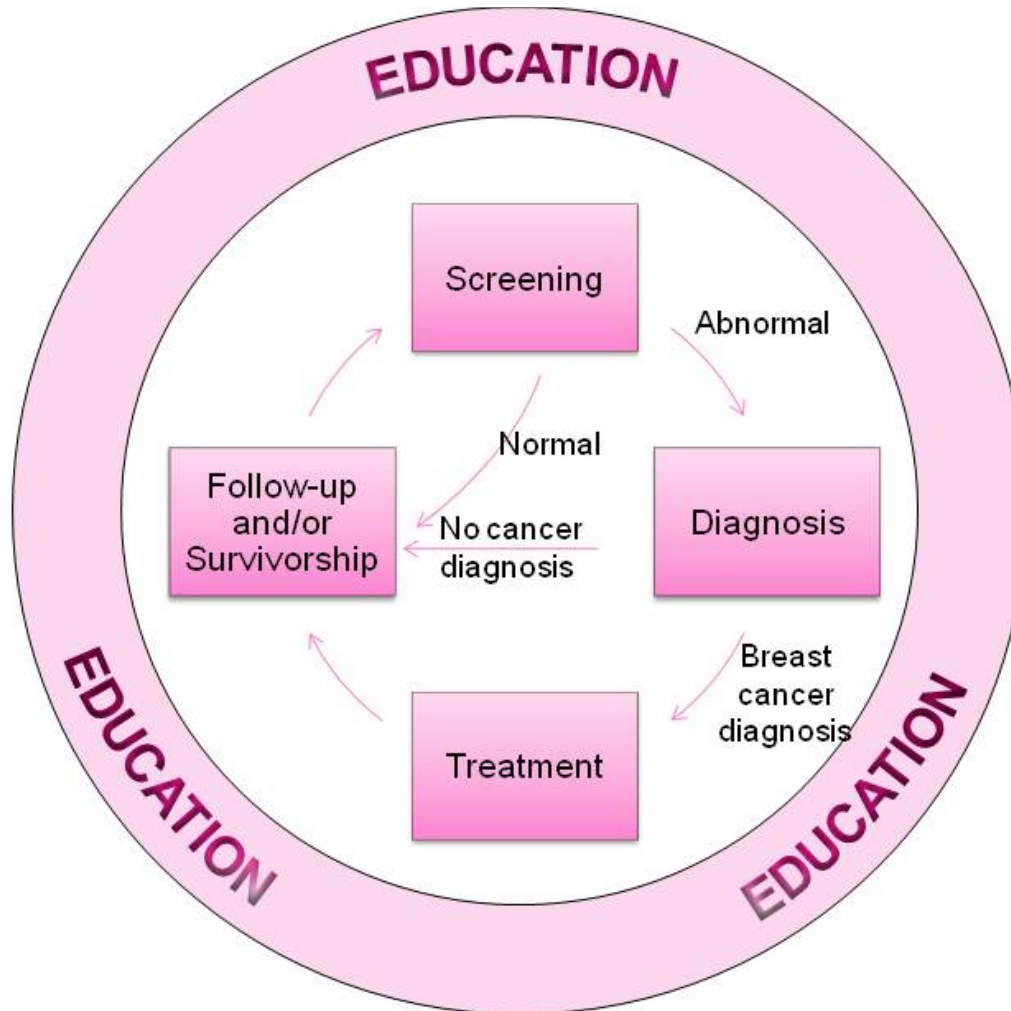


Percentages of women in Orange County that have never had a mammogram by INSURANCE STATUS:



SOURCE: California Health Interview Survey (2011-2012)

# CANCER CONTINUUM OF CARE



# PUBLIC COVERAGE (as of 10/14)

Table 3. BREAST CANCER COVERAGE MATRIX – CURRENT AS OF 10/14 (Note: eligibility criteria subject to change)					
PATIENT CHARACTERISTICS	PUBLIC COVERAGE FOR SCREENINGS		PUBLIC COVERAGE FOR DIAGNOSTICS	PUBLIC COVERAGE FOR TREATMENT	LENGTH OF COVERED TREATMENT
	Low-Income & Uninsured	Clinical Breast Exam	Screening Mammogram	(Diagnostic Mammogram, Ultrasound, MRI, Biopsy)	(Chemo, Radiation, etc.)
<b>UNDER 40</b>					
Documented	Family PACT (up to 200%) or Title X (up to 250%)	Not Available	Not Available	Breast & Cervical Cancer Treatment Program (BCCTP) with confirmed diagnosis	Duration of treatment
Undocumented	Family PACT (up to 200%) or Title X (up to 250%)	Not Available	Not Available	BCCTP with confirmed diagnosis	18 Months
Documented AND Low-Income (below 138% FPL)*	Family PACT (up to 200%) or Title X (up to 250%)	Expanded MediCal via CalOptima (formerly known as MSI)	Expanded MediCal via CalOptima (formerly known as MSI)	BCCTP with confirmed diagnosis	Duration of treatment
<b>40 AND OVER</b>					
Documented	Family PACT (up to 200%), Every Woman Counts (up to 200%) or Title X (up to 250%)	CA BCEDP: Every Woman Counts	CA BCEDP: Every Woman Counts	BCCTP with confirmed diagnosis	Duration of treatment
Undocumented	Family PACT (up to 200%), Every Woman Counts (up to 200%) or Title X (up to 250%)	CA BCEDP: Every Woman Counts	CA BCEDP: Every Woman Counts	BCCTP with confirmed diagnosis	18 Months
Documented AND Low-Income (below 138% FPL)*	Family PACT (up to 200%) or Title X (up to 250%)	Expanded MediCal via CalOptima (formerly known as MSI)	Expanded MediCal via CalOptima (formerly known as MSI)	BCCTP with confirmed diagnosis	18 Months

SOURCES: Family PACT, Title X, Every Woman Counts, BCCTP

\* Expanded MediCal

# DIAGNOSTIC GAP FOR WOMEN < 40

- Low-income, uninsured woman < 40 can get a CBE covered by Family PACT
- If has a confirmed diagnosis, can get treatment covered by BCCTP
- BUT cannot access public program for diagnostic services because EWC only covers women  $\geq 40$
- OC has no county-run clinic or hospital that provides such diagnostic services
- Limited private funds for qualified patients but not enough (Komen, Inner Images)



# POLICY RECOMMENDATION 1

## Promote regular early detection for breast cancer among medically underserved women in Orange County

### Sample Strategies/Activities:

- **Educate providers** about screening disparities, culturally appropriate resources, and low and no-cost screening programs in Orange County
- **Increase culturally appropriate outreach and education** to patients about the importance of screening, new screening benefits under the ACA, and low and no-cost screening programs in Orange County
- **Preserve funding** for safety net programs that deliver low and no-cost services, such as Family PACT and EWC

## POLICY RECOMMENDATION 2

### Address the gap in diagnostic services for low-income or uninsured women under 40 in Orange County

#### Sample Strategies/Activities:

- **Educate providers** about screening and diagnostic disparities
- **Engage in collaborative planning** to provide and sustain services for low-income women under 40 who need diagnostic services
- **Expand safety net programs** to include low-cost diagnostic services for women < 40 who have a breast abnormality

# THANK YOU

## FULL CITATIONS AVAILABLE

### BREAST CANCER POLICY BRIEF

[www.ocwomenshealth.org/2014-policy-summit](http://www.ocwomenshealth.org/2014-policy-summit)

## CONTACT INFO

**Carol Kim, MPH**

Susan G. Komen Orange County

[ckim@komenoc.org](mailto:ckim@komenoc.org)

**Sora Park Tanjasiri, DrPH, MPH**

CSUF Health Promotion Research Institute

[stanjasiri@fullerton.edu](mailto:stanjasiri@fullerton.edu)

**Allyson W. Sonenshine, JD**

Orange County Women's Health Project

[sonenshine@ocwomenshealth.org](mailto:sonenshine@ocwomenshealth.org)