

Congress Should Provide Higher Funding for CDC Cancer Programs and the National Breast and Cervical Cancer Early Detection Program

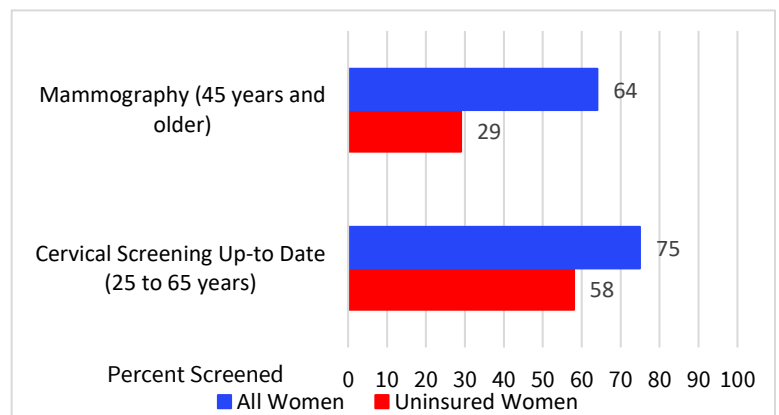
Breast and Cervical Cancer in the U.S.

- In 2024, an estimated 310,720 womenⁱ in the U.S. will be diagnosed with invasive breast cancer, and 42,250 will die from the disease.ⁱⁱ Additionally, an estimated 13,820 people will be diagnosed with invasive cervical cancer, and 4,360 will die from the disease.ⁱⁱ
- Despite the fact that U.S. breast and cervical cancer death rates have been declining for several decades, **not all people have benefited equally from the advances** in prevention, early detection, and treatments that have helped achieve these lower rates.
- For example, research shows that those who are **uninsured and underinsured have lower breast and cervical cancer screening rates**, resulting in a greater risk of being diagnosed at a later, more advanced stage of disease.ⁱⁱⁱ
- Breast and cervical cancer impact transgender and gender nonconforming individuals yet diagnosis and mortality estimates for 2024 are unknown due to existing gaps in data collection that need to be strengthened to include transgender and gender nonconforming individuals.

The National Breast & Cervical Cancer Early Detection Program (NCCEDP)

The Centers for Disease Control and Prevention's (CDC) Division of Cancer Prevention and Control (DCPC) oversees the **National Breast and Cervical Cancer Early Detection Program (NCCEDP)**. For over 30 years the NCCEDP has decreased disparities in breast and cervical cancer deaths. Through cooperative agreements with all 50 states, the District of Columbia, 13 tribal organizations, 2 U.S. territories, and 5 U.S.-Affiliated Pacific Islands, the program provides breast and cervical cancer screenings, diagnostic tests, and treatment referral services to communities that are limited-income, underserved, under-insured, and uninsured in the U.S.

Prevalence of Up-to-Date Breast & Cervical Cancer Screening Rates (%) - 2021



*Mammogram within the past year (ages 45-54 years) or past 2 years (ages ≥ 55 years); Pap Test and/or HPV DNA test as recommended, depending on age. Source: National Health Interview Survey, 2021.

The NCCEDP is the only nationally organized cancer screening program for breast and cervical cancer in the U.S. for disadvantaged and diverse populations who historically have not had adequate access to or have likely experienced other barriers to cancer screening.

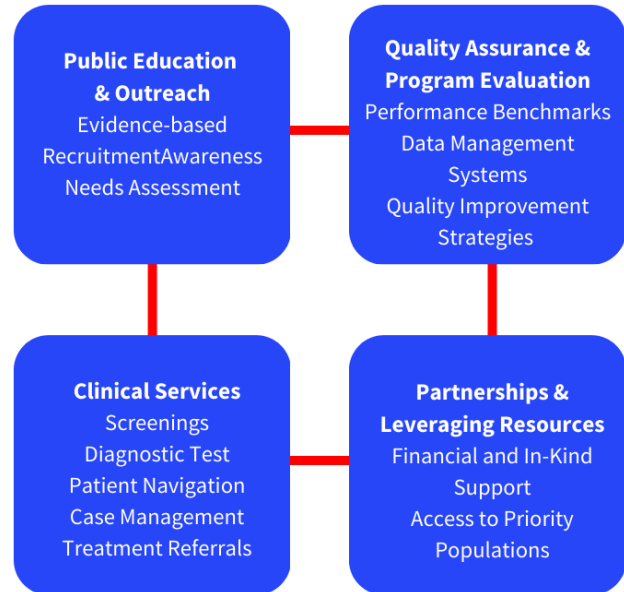
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Program Highlights

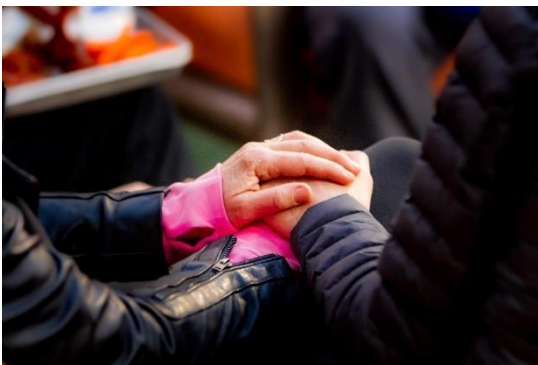
- Since the program’s inception in 1991, **NBCCEDP has provided over 16.3 million screening exams to more than 6.3 million eligible people**, detecting 78,915 invasive breast cancers and 25,029 premalignant breast lesions, as well as 5,263 invasive cervical cancers, and 245,833 premalignant cervical lesions, of which 38% were high grade.^{iv}
- In program year 2022 alone, NBCCEDP provided breast cancer screening and diagnostic services to 270,355 eligible people and **diagnosed 2,122 invasive breast cancers**.^{iv} The program also provided cervical cancer screening and diagnostic services to 126,416 eligible people and **diagnosed 89 invasive cervical cancers and 5,951 precancerous lesions, of which 34% were high grade**.^{iv}

A Successful Delivery Model – NBCCEDP



Program Eligibility

People with incomes at or below 250 percent of the federal poverty level (FPL) are eligible for the program at ages 21-64 for individuals with a cervix for cervical cancer screening and women ages 40-64 for breast cancer screening.^v **The NBCCEDP is highly effective at detecting and treating breast and cervical cancer in a population that may otherwise not be screened.** The results of not screening in a timely and appropriate fashion can be higher costs and unnecessary suffering and death due to cancers found in later stages.



The Affordable Care Act has helped improve insurance coverage, raise awareness, and reduce the costs of breast and cervical cancer screenings. **However, millions remain underinsured or uninsured and often face structural and economic barriers to lifesaving screenings.** Partnerships, an essential component of the NBCCEDP, help address many of the structural and economic barriers low-income people face when it comes to getting screened.

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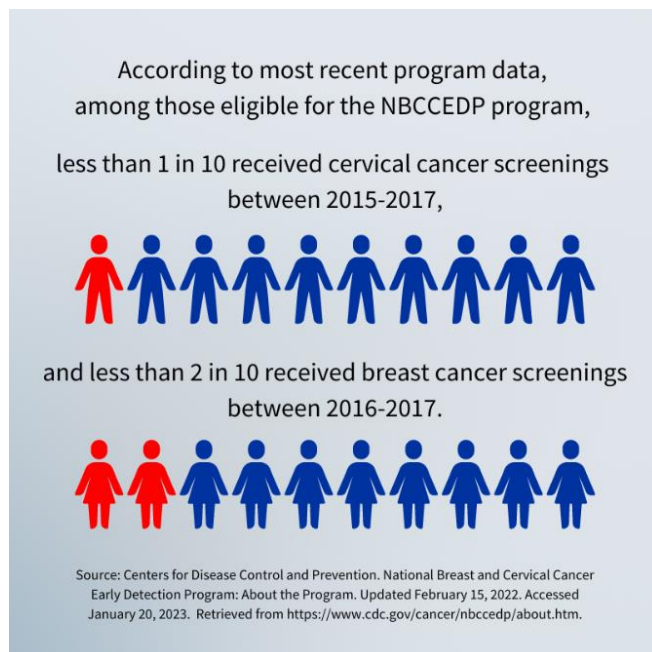
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Need for Adequate Funding for this Lifesaving Program

Due, in part, to funding challenges, the NBCCEDP cannot service all eligible individuals. According to most recent program data, among those eligible for the program, less than 1 in 10 received cervical cancer screenings (2015-2017) and less than 2 in 10 received breast cancer screenings (2016-2017).^{iv} Ensuring adequate funding for the NBCCEDP will preserve a critical safety net for those who continue to lack access to lifesaving screening, diagnostic, and treatment services and is an important step toward reducing disparities and advancing health equity in breast and cervical cancer.

Thousands count on the National Breast and Cervical Cancer Early Detection Program for lifesaving cancer screenings and diagnostic services.



ACS CAN Position

ACS CAN urges Congress to provide **\$472.4 million for CDC cancer programs, including \$230 million^{vi}** for the National Breast and Cervical Cancer Early Detection Program for FY25 to ensure access to lifesaving screenings and cancer services.

ⁱ Throughout this document *women* refers to individuals assigned female at birth. However, the NBCCEDP program also provides screening and treatment services to eligible transgender individuals.

ⁱⁱ American Cancer Society. *Cancer Facts & Figures 2024*. Atlanta: American Cancer Society; 2024.

ⁱⁱⁱ American Cancer Society. *Cancer Prevention & Early Detection Facts & Figures 2021-2022*. Atlanta: American Cancer Society; 2021.

^{iv} Centers for Disease Control and Prevention. National Breast and Cervical Cancer Early Detection Program: About the program. Updated January 16, 2024. Accessed August 8, 2024 at <https://www.cdc.gov/cancer/nbccedp/about.htm>.

^v Tangka, F., Kenny, K., Miller, J., & Howard, D. H. (2020). The eligibility and reach of the national breast and cervical cancer early detection program after implementation of the affordable care act. *Cancer causes & control: CCC*, 31(5), 473–489. <https://doi.org/10.1007/s10552-020-01286-0>

^{vi} Amount does not include the WISEWOMAN heart disease program.

^{vii} DeGroff A, Miller J, Sharma K, Sun J, Helsel W, Kammerer W, Rockwell T, Sheu A, Melillo S, Uhd J, Kenney K, Wong F, Saraiya M, Richardson LC. COVID-19 impact on screening test volume through the National Breast and Cervical Cancer early detection program, January-June 2020, in the United States. *Prev Med*. 2021 Oct;151:106559. doi: 10.1016/j.ypmed.2021.106559. Epub 2021 Jun 30. PMID: 34217410; PMCID: PMC9026719.

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