



New Mammography Bill: An Important Shift in Preventative Care

Every year, roughly 42,000 women die from breast cancer in the United States. This sobering statistic underscores the importance of early detection, a focus that a new bill introduced in the U.S. House of Representatives seeks to support by lowering the mandated starting age for mammograms from 40 to 30. With October being Breast Cancer Awareness Month, the push for earlier mammogram screenings takes on added significance. This month serves as a reminder of the vital role early detection plays in improving survival rates and health outcomes for women. If passed, this bill could reshape healthcare plans and redefine the role brokers play in client guidance.

Last month, we shared a link to an article in our Tools + Intel newsletter about this very topic, which generated substantial engagement from our readers. Given the interest, we felt it was essential to provide further insights on how this bill could impact our clients and the industry at large.

WHY THIS CHANGE MATTERS

Lowering the screening age for mammograms is not just a policy adjustment; it's a critical step in the fight against breast cancer. Recent studies show that younger populations are increasingly affected, with significant cases being diagnosed in women in their 30s.¹ While most breast cancer diagnoses occur in women over 40, early detection through routine screenings can be life-saving. The 5-year survival rate for localized breast cancer is an impressive 99%, underscoring the importance of identifying the disease in its earliest stages.² Early detection is key to improving health outcomes, and advocating for this legislative change is essential for the well-being of countless women.



Lowering the mammogram screening age could save lives. Early detection improves the 5-year survival rate to an impressive 99% for localized breast cancer.

IMPLICATIONS FOR HEALTH PLANS

You might wonder how this proposed change will impact health plans. Simply put, the bill would necessitate adjustments to coverage policies across various health plans, and insurers would need to carefully evaluate how these changes could influence premiums and benefits, particularly as employers reassess their health offerings. Investing in early detection not only saves lives but can also significantly reduce healthcare costs. For example, according to estimates from the National Cancer Institute, early detection through screening could reduce treatment costs by as much as 40%, alleviating the financial burden on both patients and healthcare systems.³

The implications of this new bill are further complicated by the ongoing case of Braidwood v. Becerra, which is currently making its way through the federal courts. This closely watched case raises significant concerns regarding the constitutionality of the Affordable Care Act's (ACA) requirement for preventive services coverage. A ruling from the Supreme Court on this matter could potentially dismantle federal mandates for cancer screenings and other preventive services tied to the ACA.

For employers and their benefits advisors, the elimination of ACA-mandated screening requirements may provide greater flexibility in plan design. However, this could also force plan administrators into challenging and potentially contentious decisions regarding screening benefits. For instance, offering breast cancer screenings with no out-of-pocket costs could become more complicated, especially for employers with fewer than 50 employees.

Investing in early detection can reduce treatment costs by up to 40%, benefiting both patients and the healthcare system.



UNDERSTANDING HEALTH PLAN FLEXIBILITY

Employers typically have some flexibility regarding their health plan designs, but certain aspects are determined by federal and state regulations, as well as the specific health insurance plan they choose. Under the ACA, health plans are required to cover certain preventive services at no cost to the patient, including mammograms for women over a certain age. If the proposed bill to lower the mandated starting age for mammograms becomes law, insurers would need to adjust their plans accordingly to comply.

The extent to which an employer can narrow or eliminate screening benefits depends on their specific health plan and its structure:

- **Self-Insured Plans:** Employers who self-insure have more control over the benefits they provide, including the option to limit or change screening benefits. This flexibility allows them to tailor their offerings to the specific needs of their workforce, but it also places the onus on them to ensure compliance with federal regulations.
- **Fully Insured Plans:** Employers that purchase fully insured plans are generally subject to the terms set by the insurance carrier, which may include certain mandated benefits. Changes in federal mandates could lead these insurers to adjust their offerings, potentially limiting an employer's ability to unilaterally narrow or eliminate screening benefits.

- Implications of Legal Changes: The outcome of cases like Braidwood v. Becerra could significantly impact how plans are structured. If the Supreme Court rules against the ACA's preventive service mandates, it could grant employers more leeway in deciding which benefits to offer, potentially leading some to eliminate certain preventive services like mammograms.
- **Cost Considerations:** If some employers choose to narrow screening benefits while others maintain them, it could create a disparity in costs and coverage. Employers that continue to offer comprehensive screening benefits might face higher premiums or costs, particularly if fewer employers choose to provide those services. This scenario emphasizes the need for brokers to stay informed about regulatory changes and help clients navigate these complexities.

THE ROLE OF ALIN MAMMOGRAPHY

As we consider these adjustments, it's essential to also examine how new technologies are transforming mammograms, particularly through the use of artificial intelligence (AI). With AI making significant strides in healthcare, especially in mammography, algorithms are now assisting radiologists in detecting breast cancer earlier and more accurately. Research shows that AI can reduce false positives and negatives, which not only enhances diagnostic accuracy but also improves patient outcomes.⁵



Al technology enhances mammography accuracy, potentially reducing false positives and improving early detection.

A study published in Nature highlighted that AI could identify cancers in mammograms with comparable accuracy to human radiologists and, in some cases, even surpass them.⁶ The integration of AI tools helps in analyzing vast amounts of imaging data quickly, identifying patterns that may be missed by the human eye. This means that not only are women receiving faster diagnoses, but healthcare providers are also able to allocate their time more effectively.

The implications of these advancements are profound, especially in light of the proposed changes to mammogram guidelines. As advocation for lowering the mandated screening age continues, it's important to consider how AI can enhance these screenings for younger populations. With the capacity to process and analyze images more effectively, AI could lead to earlier detections, thereby improving the overall survival rates for breast cancer.

BOTTOM LINE

In conclusion, understanding the implications of this new mammography bill, and the benefits of the latest technology is essential for brokers who want to maintain their competitive edge. By leveraging this knowledge, we can empower our clients to adopt innovative healthcare strategies that prioritize prevention and compliance. This proactive approach not only positions us as leaders in the industry but also enhances our clients' ability to provide comprehensive benefits that meet their employees' needs.

Stay informed, engage with your clients about these developments, and help them adapt their healthcare strategies accordingly. For personalized guidance and support, don't hesitate to contact your local BenefitMall sales team.

CONTRIBUTOR

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END NOTES

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