



Breast Cancer Screening

Dr. Michelle O'Brien, Medical Director



Breast Cancer Statistics

- Breast cancer is a type of cancer that starts in the breast(s).
- According to the Centers for Disease Control and Prevention (CDC), breast cancer is the second most common cancer among women in the US.
- According to the American Cancer Society (ACS), The average risk of a woman in the US developing breast cancer in her life is 13% (1 in 8 chance).
- According to the CDC, breast cancer is the second leading cause of cancer death among women in the US. For non-Hispanic Black women and Hispanic women, breast cancer is the leading cause of cancer death.
- Breast cancer is more treatable, and the survival rate is higher when breast cancer is found early before it has spread to other parts of the body.
- Risk of breast cancer is due to a combination of factors including age, family history, genetics, and lifestyle (i.e. physical activity, weight, alcohol consumption).





Current Screening Guidelines

- The **United States Preventive Services Task Force (USPSTF)** recommends that women who are 40 to 74 years old and are at average risk for breast cancer get a mammogram every 2 years.
- Screening recommendations vary by USPSTF, American Cancer Society, and National Comprehensive Cancer Network.
- Different screening recommendations may be used for women at higher than average risk.
- Please help these members connect with their doctor to ask about screening options and frequency.

Screening Options



Mammogram is an x-ray of the breast that is used to help look for signs of breast cancer. Mammograms are recommended for women of average risk to find breast cancer early and is the **gold standard** for breast cancer screening.

2D vs. 3D mammograms:

- 2D screening mammogram consists of taking two pictures of each breast. 2D mammograms have been the standard of care and are covered by all plans as a preventive screening.
- 3D mammogram (or digital breast tomosynthesis) consists of taking multiple images from different angles which enables viewing slides of the breast at different depths. 3D mammograms are covered by all plans as a preventive screening.

Screening Options

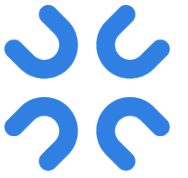


Other Screening or Diagnostic Tools:

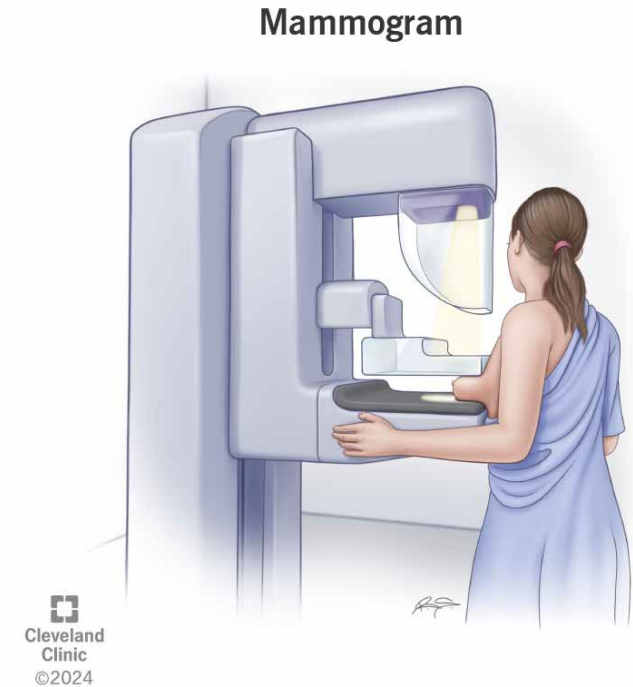
- **Breast ultrasound** uses sound waves and their echoes to make a computer pictures of the inside of the breast. Ultrasounds are typically not used as a routine screening test, but can be used for looking at areas that are not found or hard to see on a mammogram (i.e. lumps, dense breasts).
- **Breast magnetic resonance imaging (MRI)** uses radio waves and strong magnets to make detailed pictures of the inside of the breast. This is often recommended to supplement mammograms for women at high risk (i.e. family history, genetic mutation) or if there are symptoms.
- **Clinical Breast Exam** is a physical examination of the breasts performed by a trained healthcare provider, typically during a regular check-up. *This is not considered an official breast cancer screening.*

Please help members schedule time with their provider to help choose the best screening option for that member.

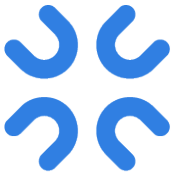
What to expect during a mammogram?



- *Members may be hesitant to get a mammogram due to fear of the process, not knowing what to expect, or fear of the results. You can use these talking points to help educate members on what to expect.*
- Mammograms can often show abnormal areas in the breast and can help providers determine if more testing (i.e. biopsy) is needed.
- Mammograms are done with a special machine that compresses the breast between two plates. This helps spread the tissue apart to get a better image. The machine takes X-rays.
- A radiologist or mammographer performs a mammogram. A radiologist will analyze the images and send results to the health care provider.



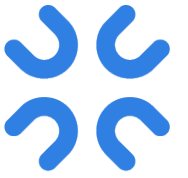
What to expect during a mammogram?



A mammogram involves the following steps:

1. Removing all clothing and jewelry above the waist. A provider will provide an open-front hospital gown or drape to wear.
2. Stand in front of the mammography machine, and the technologist will ask to remove one breast at a time from the gown and position the breast on a breast support plate.
3. The technologist will lower a plastic paddle to compress the breast against the support plate. There may be some discomfort or pressure.
4. The machine will take images of the breast while it's compressed.
5. This process will be repeated on the other breast, if applicable.
6. Once the technologist is done taking images with the machine, the procedure will be over. Mammograms typically take about 15-20 minutes. Results are typically available within a couple weeks.

Results and Follow-Up



Normal Mammogram: Means the mammogram did not show any issues or abnormal areas in the breast images.

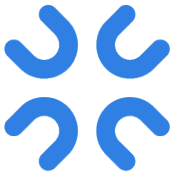
Abnormal Mammogram: Means the mammogram showed one or more suspicious areas. Follow-up may include:

- Diagnostic mammogram
- Ultrasound
- MRI
- Biopsy

Members should contact UCare for questions about out-of-pocket costs for follow-up. Costs vary by plan. Per MN statute, a follow-up ultrasound and MRI are covered without cost share.

- ❖ If the mammogram is normal or follow-up tests did not reveal the presence of breast cancer, continue screening mammograms at the recommended frequency.
- ❖ If cancer is detected, member will be referred to a provider or breast specialist to discuss next steps in care.

Where to get a mammogram?

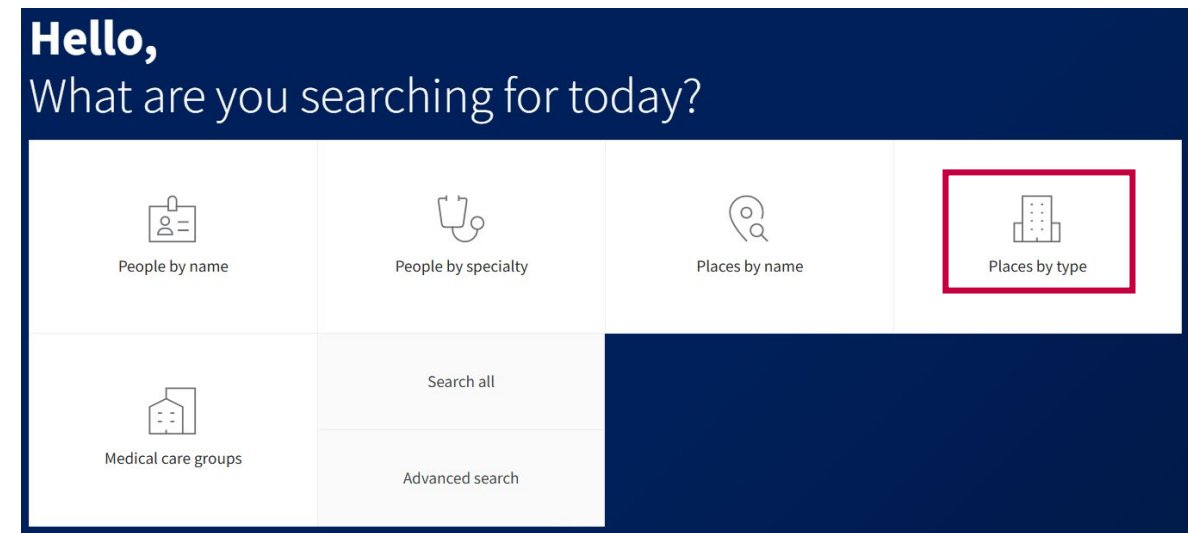


Mammograms can be done in:

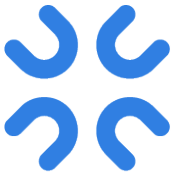
- Radiology centers and imaging centers
- Mammography clinics
- Hospital radiology departments
- Mobile mammography units
- Some doctors' offices

UCare does not require a referral from a PCP for a screening mammogram, however an order is required (often standing orders are in place to allow members to schedule directly with the screening facility).

In UCare's provider search tool (search.ucare.org) type 'Mammogram' in 'Places by type' to find in-network facility.



Addressing Common Concerns



- Do mammograms hurt?
- Are there any out-of-pocket costs?
- Is there a risk of radiation exposure?
- Are there any downsides of mammograms?



Are there other questions or concerns you hear from members related to breast cancer screening?

UCare Initiatives



\$50 Healthy Benefits+Visa Card for all UCare products
(\$30 for Aspirus Health Plan)



Outreach and Education:

- Outreach provided to UCare members by CCL, ICM, and HIT.
- Outreach provided by community partners and providers.
- Tabling at community events (i.e. Mammography Health Fair)
- Member scorecards with vouchers (June 2025) and single voucher mailings



Questions?

Sources and Resources



American Cancer Society – Breast Cancer -
<https://www.cancer.org/cancer/types/breast-cancer.html>

Susan G. Komen - <https://www.komen.org/>

Centers for Disease Control and Prevention – Breast Cancer -
<https://www.cdc.gov/breast-cancer/index.html>

National Breast Cancer Foundation – Patient Resources -
<https://www.nationalbreastcancer.org/breast-cancer-resources/>

Cleveland Clinic – Breast Cancer -
<https://my.clevelandclinic.org/health/diseases/3986-breast-cancer>