

Breast cancer: Are your employees avoiding preventive care?



You offer health insurance to your workforce – that’s great. But health insurance alone doesn’t guarantee that people are actually getting health care.

That's particularly true when it comes to preventative services. In 2020, 38% of women skipped a yearly checkup or routine test.¹ Delaying preventative health care can lead to late diagnosis and as a result can impact your female workforce.

Why patients often avoid cancer screenings

The reasons people avoid care are varied, but cost runs high. Nearly a third of Americans skipped necessary medical care in 2021 due to cost, leading many to see their health worsen.² That might even skew higher when it comes to breast cancer: In a study of 50 women at high risk for breast cancer, 19 of the 36 who were taking risk-reduction steps had delayed or skipped a step because of financial concerns.³

But cost isn’t the only reason people fail to get all the services they need. Inconvenience, anxiety, transportation and other logistical problems also play a role. And all have contributed toward the 94% drop in breast and cervical cancer screenings during the pandemic.⁴

All of these factors can also detract from your employees’ well-being, making it imperative that employers like you address the avoidance of medical care. Employees are best able to help cultivate a healthy business when they themselves are healthy. So helping your team get the care they need isn’t just benevolent — it keeps your business at its best.

Breast cancer statistics are clear: It’s better to prevent than just react

About 1 in 8 American women will develop breast cancer in their lifetime,⁵ making preventive care a necessity — especially since no one knows the exact causes of the disease, or why one woman develops it and another doesn’t. Additionally, there’s no set age at which it may occur. Women with high-risk factors such as a family history of the disease can develop it as early as their 30s if not before, and breast cancer in certain ethnicities — African American, Asian, Hispanic — is typically and inexplicably diagnosed over a decade earlier than it is for Caucasian women (which is in their 60s).⁶

Thankfully, most times, women survive breast cancer if it’s found and treated early. In fact, the average five-year survival rate for women with invasive breast cancer is 90%.⁸

What about the other 10%? That’s the difference between preventative care and reacting after the fact: About 70% of all breast cancer deaths occur among people who aren’t getting screened regularly.⁶



When should women get mammograms?

This care gap is why it's recommended that women start talking to their doctors around age 40 about when to have their first mammogram screening.⁸ And while mammogram screenings aren't generally recommended for women under this age, screening can begin at age 25 for those with genetic mutations, and screening is often initiated 10 years earlier than the age the first affected relative was diagnosed for a woman with a family history of breast cancer. In addition to mammography, a breast MRI is often recommended for those deemed high risk for the disease.⁷

Breast cancer screenings can prevent larger medical costs

The longer a problem goes unnoticed, the longer it takes to fix. And when this time is associated with a price tag, not seeking preventive measures can wind up biting your employees in the behind.

In a world where cancer patients can face out-of-pocket costs of nearly \$12,000 for just one drug,⁹ you might not be shocked to learn that the average cost for breast cancer treatment is between \$20,000 and \$100,000.¹⁰ That doesn't mean there isn't sticker shock — especially when you're the one paying. Fortunately, just as preventive care may lead to the early discovery and treatment of breast cancer, it also may lead to lower costs. Avoiding care can allow the disease to spread, leading to increased treatment when care is eventually sought, and the higher costs associated with it.

How Aflac can help your employees get the care they need

Aflac's cancer and other [supplemental insurance coverages](#) can help your employees finance both their preventive care and the cost of breast cancer treatment. Not only can our group critical illness coverage help cover an insured's costs up to the plan's limit, but our benefits are paid regardless of any other coverage you may have. It all adds up to allowing you to care for your employees by offering them the financial and health support they need — and allowing you to care for your business by keeping your workforce at its strongest.

Want to help your employees stay ahead of a possible breast cancer diagnosis? Check out [Aflac's cancer insurance](#) and [critical illness insurance](#) offerings, and speak with a representative about how they can be combined with each other and with our [disability](#) and [hospital indemnity](#) coverage.

¹ KFF. "Women's Experiences with Health Care During the COVID-19 Pandemic: Findings from the KFF Women's Health Survey". Published 3.22.2021. [Accessed 7.25.2022.](#)

² Advisory Board. "Why 30% of Americans skip necessary Medical Care". Published 12.15.2021. [Accessed 7.25.22.](#)

³ Breastcancer.org. "Women at High Risk for Breast Cancer Face Financial Barriers to Preventive Care, Even With Insurance." Published 5.11.2021. [Accessed 7.25.2022.](#)

⁴ Epic Health Research Network. "Delayed Cancer Screenings—A Second Look." 7.17.2020. [Accessed 7.25.22.](#)

⁵ Breastcancer.org. "U.S. Breast Cancer Statistics." Modified 2.4.2021. [Accessed 7.25.22.](#)

⁶ White Plains Hospital. "Breast Cancer Awareness Month - The Importance of Early Detection in Young Women." Published 10.22.2020. [Accessed 7.25.2022.](#)

⁷ Cleveland Clinic. "Breast Cancer in Young Women." Reviewed 9.18.2019. [Accessed 7.25.2022.](#)

⁸ The Texas A&M University System. "The Importance of Preventive Care Screenings." Updated 2020. [Accessed 7.25.2022.](#)

⁹ Asbestos.com. "High Cost of Cancer Treatment." Modified 1.28.2021. [Accessed 7.25.2022.](#)

¹⁰ CNBC. "This woman paid over \$225,000 to beat breast cancer. Health insurance didn't cover her bill." Published 10.22.2020. [Accessed 7.25.2022.](#)

This is a brief product overview only. Coverage may not be available in all states. Benefits/premium rates may vary based on plan selected. Optional riders may be available at an additional cost. Plans and riders may also contain a waiting period. Refer to the exact plans and riders for benefit details, definitions, limitations and exclusions. For availability and costs, please contact your local Aflac agent/producer.

Group Plan
Group Critical Illness

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Individual Plans

Cancer/Specified Disease - In Idaho, Policies B70100ID, B70200ID, B70300ID, B7010EPID, B7020EPID. In Oklahoma, Policies B70100OK, B70200OK, B70300OK, B7010EPOK, B7020EPOK. In Virginia, Policies A75100VA–A75300VA.

Critical Illness - In Idaho, Policies A73100ID & A7310HID. In Oklahoma, Policies B71100OK & B7110HOK. In Virginia, Policy A73100VA.

Short-Term Disability - In Idaho, Policy A57600IDR. In Oklahoma, Policies A57600OK & A57600LBOK. In Virginia, Policies A57600VA & A57600LBVA.

Hospital - In Idaho, Policies B40100ID & B4010HID. In Oklahoma, Policies B40100OK & B4010HOK. In Virginia, Policies B40100VA & B4010HVA.

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