

CANCER DETECTION PROGRAMS: EVERY WOMAN COUNTS

FEBRUARY 2011

REPORT TO THE LEGISLATURE:

**BREAST CANCER SCREENING AND DIAGNOSTIC
SERVICES**



CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

CANCER DETECTION PROGRAMS: EVERY WOMAN COUNTS

February 2011

Report to the Legislature: Breast Cancer Screening and Diagnostic Services

Contents

Purpose and Legislative Requirement	1
Reporting Period	1
Data Sources Used	1
Background	3
FY 2008-09 COMPLETE DATA.....	4
Women Served	4
Breast Cancer Screening and Diagnostic Services	6
Breast Cancer Diagnosis	7
Treatment Status for Women with Breast Cancer	10
FY 2009-10 Preliminary Data	11
Conclusion	13
About the Data	14
References	15

Purpose and Legislative Requirement

The California Department of Public Health (CDPH) is submitting this Breast Cancer Control Program (BCCP) report. The BCCP is currently implemented as part of *Cancer Detection Programs: Every Women Counts (EWC)*, which provides breast cancer screening services using both state and federal funds. The report is required under Section 30461 of the Revenue and Taxation Code, that established the Breast Cancer Control Program for provision of breast cancer screening and diagnostic services. The portion of the statute pertaining to the report states:

“The State Department of Public Health shall submit an annual report to the Legislature and any other appropriate entity. The report shall describe the activities and effectiveness of the program and shall include, but not be limited to, the following types of information regarding those served by the program:

- (1) The number.*
- (2) The ethnic, geographic, and age breakdown.*
- (3) The stages of presentation.*
- (4) The diagnostic and treatment status.”*

Reporting Period

This Report to the Legislature includes data for two reporting periods: complete data for Fiscal Year (FY) 2008-09 and preliminary data for FY 2009-10. Because of the time lags between when services are provided and when final payment and reimbursements are completed, data available at the end of the calendar year is incomplete. Thus, preliminary data is provided in this report for FY 2009-10, limited to the number of women served by age, race/ethnicity and county of enrollment. Breast cancer screening and diagnostic clinical services provided and stage of diagnosed breast cancer for FY 2009-10 will be included in the February 2012 Report to the Legislature, after the complete data is available. Complete data for FY 2008-09, including the number and demographics of women served, clinical services provided, and stage of cancers diagnosed is included in this Report.

Data Sources Used

EWC operates with a combination of state and federal funding. This report reflects breast cancer screening and diagnostic services funded by both sources. The numbers and figures in this report are based on the following three data sources, using the most recent reporting period available for each source:

1. ***Department of Health Care Services (DHCS) Medi-Cal fiscal intermediary (HP Enterprise Services)***: Claims data was used to identify *EWC* clinical claims for breast cancer screening and diagnostic services paid during FY 2008-09 and FY 2009-10 and to obtain the number of women served by the program.
2. ***CDPH California Cancer Registry (CCR)***: Cancer data for calendar year (CY) 2007 was used to report the number of women diagnosed with breast cancer and stage at diagnosis due to time needed to accurately collect and process case

information within the CCR. The most recent complete data available from which to report women diagnosed with breast cancer was CY 2007.

3. ***DHCS Breast and Cervical Cancer Treatment Program (BCCTP)***: BCCTP data was used to report the numbers of women who received treatment for breast cancer through BCCTP.

Background

The California Breast Cancer Act of 1993 (BCA) was signed into law on October 1, 1993, by Governor Pete Wilson. The BCA, authored by Assemblymember Barbara Friedman, went into effect on January 1, 1994, with the institution of the two-cent per pack tax increase on cigarettes to establish the Breast Cancer Control Program. Approximately half the BCA funds were directed to the Cancer Detection Section (CDS) in the California Department of Health Services (now CDPH) to implement a state-funded breast cancer screening program, called the Breast Cancer Early Detection Program (BCEDP). The BCEDP was created in coordination with the Breast and Cervical Cancer Control Program (BCCCP), a federally-funded multi-component public health program that was in existence since 1991. To meet the increasing demand for services in FY 1999-2000, CDS received additional funding from Proposition 99 Tobacco Tax and Health Promotion Act (Prop 99).

The BCEDP and BCCCP were unified in October 2002 to form one comprehensive program, the Cancer Detection Programs: Every Woman Counts (*EWC*). State BCA and Prop 99 funds pay for clinical breast services, while federal Centers for Disease Control and Prevention funds pay for public health and clinical breast and cervical services. *EWC* is the largest breast cancer detection program in the nation. *EWC* provides breast clinical services, such as mammograms, clinical breast exams, and diagnostic tests, to low-income California women ages 40 and over with inadequate or no health coverage. *EWC* also provides cervical clinical services, such as pap smears and diagnostic tests, for low-income, uninsured and underinsured California women ages 25 and over. In addition, *EWC* carries out patient and provider education to increase awareness of the importance of screening and the availability of services for disparate high risk populations, and conducts required quality assurance and program evaluation activities. This report will focus only on the breast cancer screening and diagnostic services provided by *EWC*, regardless of funding source.

Early detection of breast cancer saves lives. If breast cancer is found early, either as *in situ* (i.e., not invasive) or localized (i.e., before it spreads beyond the breast) disease, five-year survival is over 98 percent (1). Between 1988 and 2005, the mortality rate from breast cancer declined by 29 percent in California, reflecting the combined effects of better treatment and early diagnosis (1, 2). There is also evidence that the National Breast and Cervical Cancer Early Detection Program led to a small, but detectable decline in breast cancer mortality rates in the nation (3).

Despite the success of *EWC* and other breast cancer detection programs, the fact remains that more women are diagnosed with breast cancer than any other type of cancer (1). In 2007, over 28,000 California women were diagnosed with breast cancer, and more than 4,200 of those women died from the disease (4).

FINAL REPORT

Women Served

FY 2008-09

In FY 2008-09, approximately 230,000 women received a *EWC* breast cancer screening or diagnostic service. The majority of women who accessed services through *EWC* were older: 57 percent were ages 50 and over, while 43 percent were ages 40-49 at the time of service. Of the women served in FY 2008-09, 70 percent were Hispanic, reflecting California's large uninsured Hispanic population. Nearly 60 percent of women received services in Los Angeles and other Southern California counties. Over 1,000 primary care providers located throughout the state delivered public health and clinical services to women enrolled in *EWC* during FY 2008-09. Table 2 shows the demographic and geographic distribution of women who received *EWC* breast cancer screening and diagnostic services.

Table 1. Women Who Received CDP: EWC Breast Cancer Screening and Diagnostic Services in FY 2008-09

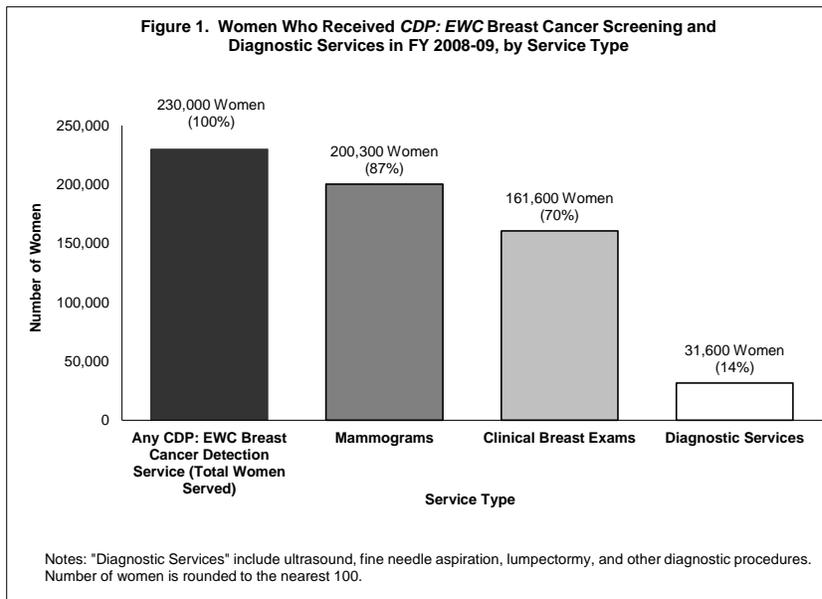
	Number	Percent
Total	230,000	100%
Race/Ethnicity		
Hispanic	160,500	70%
White	8,400	4%
African American	2,700	1%
Asian/Pacific Islander	12,500	5%
Native American	300	<1%
Other	400	<1%
Multiple Race	400	<1%
Unknown	36,900	16%
Missing	7,900	3%
Age Group		
40-49	98,600	43%
50-59	91,100	40%
60 and over	39,100	17%
Unknown	1,200	1%
County		
Alameda	7,200	3%
Alpine	0	<1%
Amador	100	<1%
Butte	1,200	1%
Calaveras	100	<1%
Colusa	300	<1%
Contra Costa	1,400	1%
Del Norte	100	<1%
El Dorado	300	<1%
Fresno	5,300	2%
Glenn	300	<1%
Humboldt	700	<1%
Imperial	1,500	1%
Inyo	100	<1%
Kern	4,300	2%
Kings	1,100	<1%
Lake	300	<1%
Lassen	100	<1%
Los Angeles	91,900	40%
Madera	1,100	<1%
Marin	400	<1%
Mariposa	*	<1%
Mendocino	500	<1%
Merced	1,900	1%
Modoc	*	<1%
Mono	*	<1%
Monterey	2,500	1%
Napa	800	<1%
Nevada	200	<1%
Orange	24,000	10%
Placer	500	<1%
Plumas	100	<1%
Riverside	9,400	4%
Sacramento	2,600	1%
San Benito	400	<1%
San Bernardino	9,200	4%
San Diego	19,600	9%
San Francisco	5,300	2%
San Joaquin	5,400	2%
San Luis Obispo	800	<1%
San Mateo	3,700	2%
Santa Barbara	2,200	1%
Santa Clara	4,500	2%
Santa Cruz	2,100	1%
Shasta	800	<1%
Sierra	*	<1%
Siskiyou	300	<1%
Solano	700	<1%
Sonoma	2,100	1%
Stanislaus	2,700	1%
Sutter	500	<1%
Tehama	200	<1%
Trinity	*	<1%
Tulare	3,700	2%
Tuolumne	100	<1%
Ventura	4,500	2%
Yolo	700	<1%
Yuba	300	<1%
Missing	100	<1%

Notes: All number of women served are rounded to the nearest 100. Cells marked with a * denote counties where fewer than 100 women received services. "Missing" race/ethnicity and county means no information was reported, while "Unknown" means that there was not enough information provided to determine a woman's race/ethnicity.

Breast Cancer Screening and Diagnostic Services

Breast cancer screening services include clinical breast exams and mammography. Women with abnormal screening results are referred for follow-up diagnostic services. Those diagnosed with breast cancer are referred to the Breast and Cervical Cancer Treatment Program (BCCTP) within DHCS. The BCCTP provides cancer treatment for eligible low-income California residents who are screened by *EWC*.

As shown in Figure 1, of the 230,000 women who received breast cancer screening and diagnostic services in FY 2008-09, approximately 200,300 women (87 percent) received a mammogram, approximately 161,600 (70 percent) received a clinical breast exam, and approximately 31,600 women (14 percent) had a diagnostic service including, but not limited to, ultrasound and/or breast biopsy (fine needle aspiration, needle core/vacuum assisted biopsy, or excisional biopsy).



Breast Cancer Diagnosis

California Cancer Registry (CCR) data for CY 2007—the most recent complete data available—was used to report the number of women diagnosed with breast cancer and stage at diagnosis.

In CY 2007, approximately 1,220 women were diagnosed with breast cancer after accessing *EWC* breast cancer screening and diagnostic services. Almost 500 (40 percent) of these women had early stage breast cancer (either *in situ* or localized). Approximately 650 women (53 percent) had late stage breast cancer (regional or distant), and about 80 women (7 percent) had breast cancers that could not be staged. Table 3 describes the cancer stage at diagnosis as well as the demographics of *EWC* clients diagnosed with breast cancer. Figure 2 depicts the cancer stage at diagnosis by age group.

Table 2. Women Who Were Diagnosed with Breast Cancer Following a Recent CDP: EWC Breast Cancer Detection Service, Calendar Year 2007

(a) By Stage at Diagnosis (compared to all Californians)

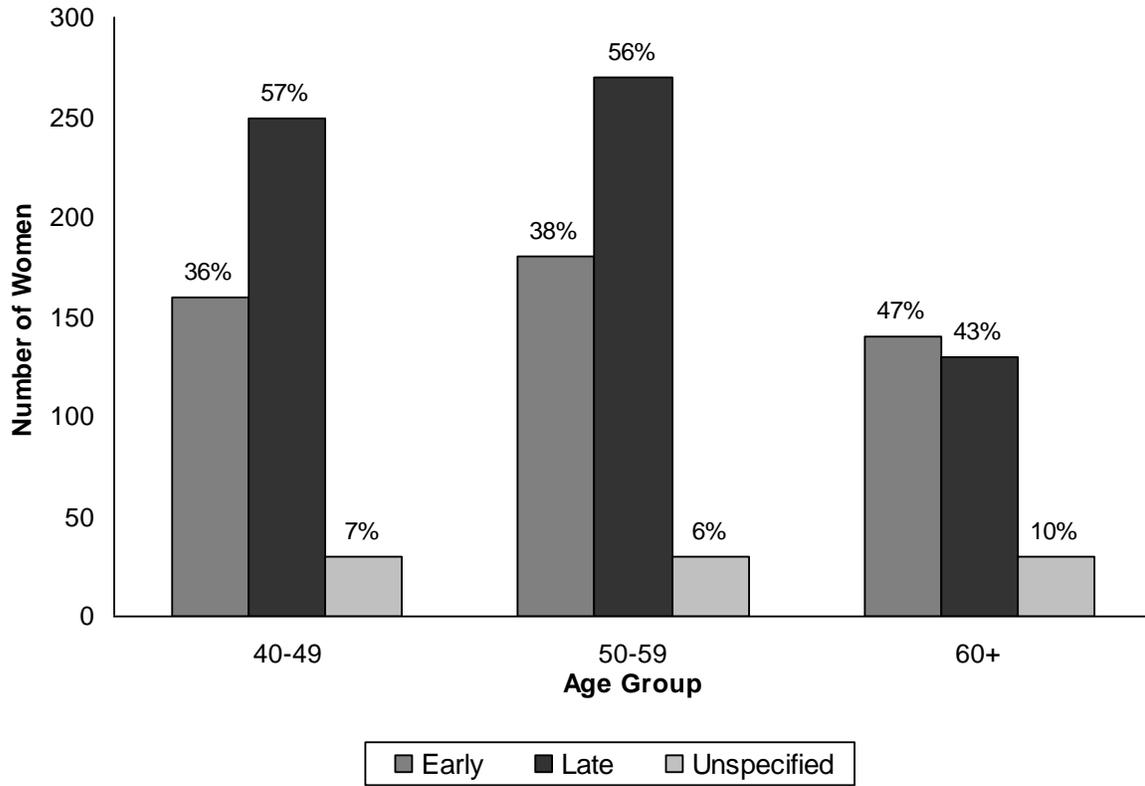
	Number	Percent	Number	Percent
Total	1,220	100%	27,490	100%
Stage at Diagnosis	CDP:EWC		California	
<i>In situ</i>	200	16%	5,220	19%
Localized	290	24%	10,040	37%
Regional	380	31%	7,290	27%
Distant	270	22%	3,690	13%
Unknown/Unspecified	80	7%	1,250	5%

(b) By Race/Ethnicity, Age group

	Number	Percent
Total	1,220	100%
Race		
White	320	26%
African American	80	7%
Hispanic	630	52%
Asian/Pacific Islander	190	16%
Native American	*	<1%
Other/Unknown	*	<1%
Age Group		
40-49	440	36%
50-59	480	39%
60 and over	300	25%
Unknown	*	<1%

Notes: All number of women is rounded to the nearest 10. Cells marked with a * denote groups in which fewer than 10 women were diagnosed with breast cancer. A woman's age at diagnosis and race/ethnicity were obtained from the diagnosis record from the California Cancer Registry. Recent is defined as women who received a service on the same day or up to one year prior to the diagnosis date. Stage at diagnosis for all Californians was obtained from: http://www.ccrca.org/Reports_and_Factsheets/Annual_Statistical_Tables_by_Site.shtml

Figure 2. Women Who Were Diagnosed with Breast Cancer in 2007 Following a Recent CDP: EWC Breast Cancer Detection Service, by Age Group and Stage at Diagnosis



Notes: A woman's age at diagnosis was obtained from the diagnosis record from the California Cancer Registry. Women ages 39 and under are not presented due to the small number of women.

Recent is defined as women who received a service on the same day or up to one year prior to the diagnosis date.

Treatment Status for Women Diagnosed with Breast Cancer

Since January 2002, with the passage of federal Public Law 106-354, women diagnosed with breast cancer through *EWC* have access to cancer treatment services through DHCS' BCCTP. Of the 1,220 women diagnosed with breast cancer in CY 2007 following a recent *EWC* breast cancer screening service, 78.7 percent received treatment services through BCCTP, 19.7 percent received treatment through other programs or health coverage, and 1.6 percent either declined treatment, died before treatment or were lost to follow-up.

FY 2009-10 Preliminary Report

In FY 2009-10, approximately 165,200 women received a *EWC* breast cancer screening or diagnostic service. The majority of women who accessed services through *EWC* were older: 67 percent were ages 50 and over, while 32 percent were ages 40-49 at the time of service. Of the women served in FY 2009-10, 70 percent were Hispanic, reflecting California's large uninsured Hispanic population. Approximately 60 percent of women received services in Los Angeles and other Southern California counties. Table 3 shows the demographic and geographic distribution of women who received *EWC* breast cancer screening and diagnostic services. However, this should not be considered final conclusions for distribution of services provided during FY 2009-10, as the data is still incomplete.

Table 3. Women Who Received CDP: EWC Breast Cancer Screening and Diagnostic Services in FY 2009-10 (Preliminary)

	Number Percent	
	165,200	100%
Total		
Race/Ethnicity		
Hispanic	115,200	70%
White	15,100	9%
African American	5,200	3%
Asian/Pacific Islander	23,300	14%
Native American	600	<1%
Other	300	<1%
Multiple Race	500	<1%
Unknown	4,800	3%
Missing	200	<1%
Age Group		
40-49	53,400	32%
50-59	78,000	47%
60 and over	33,700	20%
Unknown	100	<1%
County		
Alameda	6,100	4%
Alpine	*	<1%
Amador	100	<1%
Butte	600	<1%
Calaveras	100	<1%
Colusa	200	<1%
Contra Costa	1,000	1%
Del Norte	100	<1%
El Dorado	200	<1%
Fresno	3,300	2%
Glenn	200	<1%
Humboldt	600	<1%
Imperial	1,000	1%
Inyo	100	<1%
Kern	2,800	2%
Kings	800	<1%
Lake	200	<1%
Lassen	*	<1%
Los Angeles	65,500	40%
Madera	700	<1%
Marin	300	<1%
Mariposa	*	<1%
Mendocino	300	<1%
Merced	1,200	1%
Modoc	*	<1%
Mono	*	<1%
Monterey	1,600	1%
Napa	400	<1%
Nevada	100	<1%
Orange	18,300	11%
Placer	400	<1%
Plumas	100	<1%
Riverside	5,700	3%
Sacramento	1,800	1%
San Benito	400	<1%
San Bernardino	5,900	4%
San Diego	15,100	9%
San Francisco	3,900	2%
San Joaquin	3,700	2%
San Luis Obispo	700	<1%
San Mateo	2,800	2%
Santa Barbara	1,600	1%
Santa Clara	2,900	2%
Santa Cruz	1,600	1%
Shasta	600	<1%
Sierra	*	<1%
Siskiyou	200	<1%
Solano	500	<1%
Sonoma	1,400	1%
Stanislaus	2,000	1%
Sutter	400	<1%
Tehama	100	<1%
Trinity	*	<1%
Tulare	2,500	2%
Tuolumne	100	<1%
Ventura	3,500	2%
Yolo	600	<1%
Yuba	300	<1%
Missing	600	<1%

Notes: All number of women served are rounded to the nearest 100. Cells marked with a * denote counties where fewer than 100 women received services. "Missing" race/ethnicity and county means no information was reported, while "Unknown" means that there was not enough information provided to determine a woman's race/ethnicity.

It should be noted that the number of women served during FY 2009-10 is significantly less than that reported for FY 2008-09. This is due to a CDPH policy to limit enrollment to women ages 50 and older beginning January 1, 2010. For cost savings, CDPH also closed new enrollments for all women during that same time period. CDPH reopened enrollment to women ages 40 and older on December 1, 2010.

A final analysis that includes Screening and Diagnostic Services for FY 2009-10, Breast Cancer Diagnosis and Treatment Status for CY 2008 will be provided in the February 2012 Report to the Legislature.

Conclusion

It was the intent of the Legislature in enacting the BCA to decrease breast cancer mortality rates among underserved women.

EWC provided life-saving breast cancer screening and diagnostic services to approximately 230,000 women in FY 2008-09 who otherwise would not have had access to care. In CY 2007, according to the most recent CCR data, more than 1,200 women were diagnosed with breast cancer after accessing *EWC* services. Many of these breast cancers (40 percent) were found at an early stage. Given that early stage breast cancer diagnosis increases survival, and that women served in *EWC* are less likely to have their cancer diagnosed at an early stage, this program is serving a critical need for the women of California. A large majority of these women (79 percent) were successfully enrolled in the state-funded treatment program, BCCTP.

About the Data

The information provided in the tables and figures regarding breast cancer screening and diagnostic clinical services is based on Medi-Cal fiscal intermediary (HP Enterprise Services) data that identified *EWC* clinical claims paid in FY 2008-09 (Final) and FY 2009-10 (Preliminary). Because of the time lags between when services are provided and when final payment and reimbursements are completed, data available at the time of writing this report is incomplete. Thus, preliminary data is provided for FY 2009-10, limited to the number of women served by age, race/ethnicity and county of enrollment. Clinical services provided and stage of diagnosed breast cancer for FY 2009-10 will be included in the February 2012 Report to the Legislature, after the complete data is available. Note that because state and federal monies were combined to fund *EWC*, all women who received breast cancer related program services are represented in this report. Women's age at first clinical service of the year and race/ethnicity information are self-reported to providers. Numbers for some racial/ethnic groups may be underreported as many women chose not to identify their race/ethnicity. The county of service as presented in Tables 1 and 3 was the county of the enrolling provider at the time of a woman's first clinical service of the year.

The number of women served is a count of unique (or unduplicated) women from clinical claims data. The count of unique women is derived through probabilistic matching. Probabilistic matching is a process by which multiple records for a single woman are consolidated using identifiers, such as name, mother's maiden name, date of birth, address, etc.

CCR data for CY 2007 was used to identify breast cancers diagnosed among women who received a *EWC* breast cancer screening or diagnostic service on the same day or up to one year prior to the diagnosis date. Providers are mandated to report all breast cancer diagnoses to CCR, but due to time needed to accurately collect and process case information, the most recent complete data available from which to report women diagnosed with breast cancer was CY 2007. In tables and figures specific to cancer diagnoses, the age at diagnosis and racial/ethnic group were obtained from the medical record reported by the provider.

DHCS data for BCCTP was used to identify women with breast cancer who received treatment through BCCTP.

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