

ACS CAN Supports the Access to Breast Cancer Diagnosis Act (S. 1500/H.R. 3037)

ACS CAN Position

ACS CAN supports the Access to Breast Cancer Diagnosis Act to increase access to no cost breast cancer screening, including all diagnostic and supplemental tests. Ensuring breast cancer screening services — including diagnostic and follow-up testing — are covered without cost-sharing is essential to increasing access and expanding coverage of breast cancer screening.

Background

Breast cancer is the second most diagnosed cancer among women in the U.S. and the second leading cause of cancer death among women after lung cancer. In 2025, an estimated 316,950 women in the U.S. will be diagnosed with invasive breast cancer, and 42,680 will die from the disease.ⁱ Breast cancer is the leading cause of cancer death among Black and Hispanic women.ⁱⁱ Breast cancer screenings and early detection through mammograms save lives, but even today too many don't have access to lifesaving breast cancer screenings. In 2021, 67% of women ages 40 years and older were up to date with breast cancer screening in the past 2 years. Although, Black women appear to have the highest screening prevalence (73% in the past 2 years), they are less likely to have high-quality screening and timely follow-up of abnormal results.^{iii, iv}

Some insurers apply cost sharing when initial breast cancer screening requires additional follow-on testing to determine whether an individual has cancer, or if dense breast tissue requires additional imaging. These tests are integral to the screening process to determine whether an individual has cancer and therefore should be provided with no patient cost-sharing. While federal law requires most private insurance and Medicaid expansion plans to cover screening mammograms with no patient cost sharing, unfortunately for some women there are still instances where a patient may be charged for follow-up or supplemental imaging.

Bill Summary

The bi-partisan “Access to Breast Cancer Diagnosis Act” or “ABCD Act” (S. 1500/H.R. 3037) was introduced by the Senator Jeanne Shaheen (D-NH) and Senator Katie Britt (R-AL) and Representative Debbie Dingell (D-MI-6) and Representative Brian Fitzpatrick (R-PA-1). The ABCD act:

- Requires coverage without cost-sharing for diagnostic and supplemental breast cancer screening tests by private insurance plans.
- Defines diagnostic and supplemental breast cancer screening tests as tests that are medically necessary and appropriate in accordance with the National Comprehensive Cancer Network Guidelines (including mammography, MRI, or ultrasound) used to evaluate an abnormality from a screening example or to screen for breast cancer based on factors that may increase a person's risk.

- Defines cost-sharing as a deductible, coinsurance, copayment and any maximum limitation on these or similar out-of-pocket expenses. The legislation also provides a *safe harbor* for high-deductible health plans. A safe harbor under the Affordable Care Act is a way for employers to demonstrate that their health care plans are affordable.

ⁱ [American Cancer Society. Cancer Facts & Figures 2025. Atlanta: American Cancer Society; 2025.](#)

ⁱⁱ [American Cancer Society. Cancer Facts & Figures 2025. Atlanta: American Cancer Society; 2025.](#)

ⁱⁱⁱ American Cancer Society, Breast Cancer Facts and Figures 2024-2025. Atlanta, American Cancer Society; 2024.

^{iv} Karliner LS, Kaplan C, Livaudais-Toman J, Kerlikowske K. Mammography facilities serving vulnerable women have longer follow-up times. Health Serv Res. 2019 Feb;54 Suppl 1(Suppl 1):226-233. doi: 10.1111/1475-6773.13083. Epub 2018 Nov 5. PMID: 30394526; PMCID: PMC6341204.