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Mammography Screening

Does Community Uninsurance Matter?

About 47 million people in the United States do not have health insurance coverage, and the number of uninsured will keep rising if health insurance premiums continue to grow faster than earnings. Many studies have shown that uninsured adults are more likely to lack access to health care and receive lower-quality health care—including preventive care—than are insured adults. Lack of health insurance coverage has also been linked to delays in the detection of breast cancer and a threefold decrease in the probability of undergoing routine mammography screening. Lack of insurance may also be associated with reduced care for the surrounding insured population if high levels of community uninsurance create financial stress on local health care systems.

Mammography services may be particularly sensitive to community insurance rates for several reasons. Reimbursement for mammography services has declined substantially during the last 10 years and, as such, providing screening mammography can be a financial liability for a health system or free-standing radiology facility. Furthermore, mammography's capital-intensive cost structure makes mammography facilities financially sensitive to changes in the demand for their services. Mammography screening facilities must operate near full capacity to cover their fixed costs. If uninsured individuals are more likely to

forego preventive services, high levels of community uninsurance may decrease the volume of services delivered by mammography facilities and effectively increase the average costs of providing screening services.

Mammography use may also be particularly sensitive to community uninsurance because of the growing shortage of breast radiologists and certified mammography technologists. If radiologists and technologists are in high demand, they may be unlikely to locate in communities where the profit from and the demand for screening mammography is relatively low.

José A. Pagán, David A. Asch, Cynthia J. Brown, Carmen E. Guerra, and Katrina Armstrong of the University of Texas–Pan American and the University of Pennsylvania evaluated whether the proportion of the local population without health insurance coverage was related to whether women underwent mammography screening. Survey data on 12,595 women 40 to 69 years of age from the 2000 to 2001 Community Tracking Study Household Survey were used to analyze the relation between community lack of insurance and whether the respondent had a mammogram within the past year.

Women age 40 to 69 were less likely to report that they had a mammogram within



the last year if they resided in communities with a relatively high uninsurance rate, even after adjusting for other factors. After adjusting for individual insurance and other factors, a 10-percentage-point decrease in the proportion of the local insured population is associated with a 17 percent decrease in the odds that a woman age 40 to 69 years will undergo mammography screening within a year.

Their study concluded that women living in communities with high uninsurance are substantially less likely to undergo mammography screening. These results are consistent with the view that the negative impact of uninsurance extends to everyone in the community regardless of individual health insurance status.

IPHP Research Brief 08-04 is based on excerpts/summary of the article: Pagán, José A., David A. Asch, Cynthia J. Brown, Carmen E. Guerra, and Katrina Armstrong (2008). "Lack of Community Insurance and Mammography Screening Rates Among Insured and Uninsured Women". Journal of Clinical Oncology, 26(11), 1865-1870.