

Increasing Cancer Screening: Reducing Client Out-of-Pocket Costs

Task Force Finding and Rationale Statement

Intervention Definition

These interventions attempt to minimize or remove economic barriers that impede client access to cancer screening services. Costs can be reduced through a variety of approaches, including vouchers, reimbursements, reduction in co-pays, or adjustments in federal or state insurance coverage. Efforts to reduce client costs may be combined with measures to provide client education, information about program availability, or measures to reduce structural barriers.

Task Force Finding (October 2009)

The Community Preventive Services Task Force recommends reducing client out-of-pocket costs for breast cancer screening on the basis of sufficient evidence of effectiveness in increasing screening for breast cancer. There is insufficient evidence to determine the effectiveness of reducing out-of-pocket costs in increasing screening for cervical or colorectal cancer because too few (cervical cancer) or no (colorectal cancer) studies were identified. Nonetheless, the consistent favorable results for interventions that reduce costs for breast cancer screening and several other preventive services suggest that such interventions are likely to be effective for increasing cervical and colorectal cancer screening as well.

Rationale

The Task Force finding is based on an update of a previous review. The primary findings from this update are unchanged from the previous Task Force findings because no new studies of the effectiveness of interventions to reduce client out-of-pocket costs for breast, cervical, or colorectal cancer screening were identified. However, based on the strength and consistency of the relationship between reducing costs and increasing breast cancer screening and other preventive services, the findings statement was modified to reflect the likelihood that such a relationship would generalize to cervical and colorectal cancer screenings. Nonetheless, additional research assessing the effects of reducing out-of-pocket costs for cervical and colorectal cancer screening would be helpful.

Publications

Sabatino SA, Lawrence B, Elder R, Mercer SL, Wilson KM, DeVinney B, Melillo S, Carvalho M, Taplin S, Bastani R, Rimer BK, Vernon SW, Melvin CL, Taylor V, Fernandez M, Glanz K, Community Preventive Services Task Force. Effectiveness of interventions to increase screening for breast, cervical, and colorectal cancers: nine updated systematic reviews for The Guide to Community Preventive Services. *Am J Prev Med* 2012;43(1):765-86.

Community Preventive Services Task Force. Updated recommendations for client- and provider-oriented interventions to increase breast, cervical, and colorectal cancer screening. *Am J Prev Med* 2012;43(1):760-4.

Disclaimer

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