

SECTION 4 ELIGIBILITY GUIDELINES

The Tennessee Breast and Cervical Screening Program (TBCSP) is required to provide cancer screening services to individuals meeting specific eligibility guidelines based on funding availability.

General Eligibility

The following eligibility guidelines must be met in order for individuals to be enrolled for TBCSP services:

- Tennessee resident
- Female, transgender female (male to female), or transgender male (female to male)
- Symptomatic males may qualify for diagnostic services (Susan G. Komen or State funds)
- Meet age requirements for breast screening
- Meet age requirements for cervical screening
- Income at or below 250% of Federal Poverty Level (FPL) for family size <https://aspe.hhs.gov/poverty-guidelines>

AND

- Uninsured – defined as individuals who have no private health insurance, TennCare or Medicare coverage or have exhausted their annual or lifetime benefits.

OR

- Underinsured – defined as individuals who either do not have coverage for breast or cervical screening or who do not have coverage for diagnosis and treatment of breast or cervical cancer (individuals with health insurance that covers TBCSP services are not considered underinsured even if they state they are unable to pay applicable co-pays and deductibles) Clients with Medicare Part A and not B are considered underinsured.

Determining Income Status

The program follows FPL guidelines which are adjusted annually. The annual FPL is normally received by March each year. The FPL chart is sent electronically to the regional coordinators when Central Office receives it.

- Verbal declaration of income and insurance status is sufficient for TBCSP services
- If self-employed – use prior year net income to establish financial eligibility based on family size
 - e.g., if a family of 3 has a gross income of \$45,000 but business expenses are \$20,000; their net income is \$25,000
- Individuals whose family income is at or below 250% of the FPL are eligible for screening and diagnostic services for breast and cervical cancer
- Child support is not considered income for the mother, according to DHS policy and should not be counted in determining income

Breast Cancer Screening Eligibility

- Clinical Breast Exam (CBE) (Annual)
 - Females between the ages of 40 and older
 - Females 18-39 who meet general eligibility requirements and are unable to reproduce due to sterilization
- Mammography (Biennial)
 - Average risk females age 50 and older who meet general eligibility guidelines
 - Average risk females age 40-49 who meet general eligibility guidelines and have made a shared decision with their healthcare provider
 - Transgender females (male to female) who meet general eligibility guidelines AND have been taking feminizing hormones for a minimum of 5 years, regardless of age (note: transgender females over the age of 50 DO NOT meet screening criteria unless they have had at least 5 years of feminizing hormone use)
 - Transgender males (female to male) who meet general eligibility guidelines AND have NOT had a bilateral mastectomy, OR have only had a breast reduction should follow the same guidelines as non-transgender females
- Mammography (High Risk Women)
 - All women should undergo a risk assessment to determine if they are at high risk for breast cancer. "Women at high risk" includes those who have a known genetic mutation such as BRCA 1 or 2, first-degree relatives with premenopausal breast cancer or known genetic mutations, a history of radiation treatment to the chest area before the age of 30 (typically for Hodgkin's lymphoma), and a lifetime risk of 20% or more for development of breast cancer based on risk assessment models that are largely dependent on family history.
 - High risk females age 25 and older, who meet general eligibility guidelines and are asymptomatic. These clients should be screened with both an annual screening mammogram and an annual screening breast MRI if clinically indicated. See NCCN guidelines.

Breast Cancer Screening Exclusions

- Females or transgender females who receive Medicare-Part B and/or Medicaid and/or TennCare
- Transgender females who have not been taking feminizing hormones for a minimum of 5 years, regardless of age
- Males (not including transgender females or transgender males) are NOT eligible for TBSCP *screening* services per federal laws and NBCCEDP policies but may qualify for diagnostic services
- Females or transgender males with other gynecological cancers

Breast Cancer Diagnostics Eligibility

- Clients ages 18 and older may be eligible for breast cancer diagnostic services if they meet general eligibility guidelines and have any of the following:
 - Breast symptoms
 - Self-palpable breast mass
 - Abnormal nipple discharge
 - Skin or nipple changes or distortions
 - Persistent non-cyclic breast pain
 - Abnormal clinical breast exam (CBE)
 - Abnormal screening mammogram or breast imaging
 - Abnormal screening MRI (screening MRIs are only approved under select circumstances – see MRI policy)
 - Personal history of breast cancer and any of the above criteria
- Transgender females (male to female) ages 18 and older may be eligible for breast cancer diagnostic services if they meet general eligibility guidelines and have any of the following:
 - Breast symptoms
 - Self-palpable breast mass
 - Abnormal nipple discharge
 - Skin or nipple changes or distortions
 - Persistent breast pain
 - Abnormal clinical breast exam (CBE)
 - Abnormal screening mammogram or breast imaging
 - Abnormal screening MRI (screening MRIs are only approved under select circumstances – see MRI policy)
 - Personal history of breast cancer and any of the above criteria
- Transgender males (female to male) age 18 and older may be eligible for breast cancer diagnostic services if they meet general eligibility guidelines and have any of the following:
 - Breast symptoms
 - Self-palpable breast mass
 - Abnormal nipple discharge
 - Skin or nipple changes or distortions
 - Persistent non-cyclic breast pain
 - Abnormal clinical breast exam (CBE)
 - Abnormal screening mammogram or breast imaging
 - Abnormal screening MRI (screening MRIs are only approved under select

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- circumstances – see MRI policy)
 - Personal history of breast cancer and any of the above criteria
 - Must NOT have had a bilateral mastectomy (does not include breast reduction)
- Males age 18 and older may be eligible for breast cancer diagnostic services through Susan G. Komen or state funds if they meet general eligibility guidelines and have any of the following:
 - Breast symptoms
 - Self-palpable breast mass
 - Abnormal nipple discharge
 - Skin or nipple changes or distortions
 - Persistent breast pain
 - Abnormal clinical breast exam (CBE)
 - Abnormal mammogram or breast imaging
 - Personal history of breast cancer and any of the above criteria

Cervical Cancer Screening Eligibility

- Females and transgender males (female to male) age 40-64 who meet general eligibility guidelines and HAVE NOT had a total hysterectomy
- Females and transgender males age 21-39 who meet general eligibility guidelines and are unable to reproduce due to sterilization
- Females and transgender males age 21-64 who meet general eligibility guidelines and are considered HIGH-RISK due to:
 - In-utero DES exposure
 - Immunocompromised due to:
 - HIV infection
 - Immunosuppression due to organ transplantation
 - Any immunocompromising disease
 - History of cervical cancer (with or without hysterectomy)
- Females and transgender males who meet general eligibility guidelines and have a history of cervical neoplasia or in situ disease may continue routine cervical cancer screening through TBSCP for 20 years post treatment
- Females and transgender males who meet general eligibility guidelines and have a history of invasive cervical cancer may receive annual screening indefinitely as long as they have a life expectancy of greater than 10 years, up to age 65
- Females and transgender males 65 and older who meet general eligibility guidelines may qualify for screening. Cervical cancer screening is not recommended for women older than 65 years of age who have had adequate screening and are not high risk. If a woman over 64 needs to be screened and is eligible to receive Medicare benefits but is not enrolled, she should be encouraged

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to enroll. Women enrolled in Medicare Part B are not eligible for the TBCSP clinical services. Women who are not eligible to receive Medicare Part B and Medicare-eligible women who cannot pay the premium to enroll in Medicare Part B are eligible to receive clinical services through the TBCSP if they meet all other general eligibility guidelines

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Cervical Cancer Diagnostics Eligibility

- Females and transgender males ages 21 and older may be eligible for cervical cancer diagnostic assessment services if
 - They meet TBCSP general eligibility guidelines **AND**
 - Have had abnormal cervical screening results
- Diagnostic testing should be requested and performed following the most recent ASCCP screening and management guidelines
- Transgender females (male to female) are not eligible for cervical cancer screening or diagnostics through TBCSP
- Females and transgender males who have had a complete hysterectomy for cervical cancer and have an abnormal screening vaginal pap test are eligible for further diagnostic testing

Cervical Cancer Diagnostic Exclusions

- Females and transgender males ages 21 and older who have had a complete hysterectomy (uterus and cervix) for benign reasons are not eligible cervical cancer screening or diagnostics
 - Vaginal pap testing is only approved for those who have had a complete hysterectomy for cervical cancer or CIN2 or greater.