

## Tennessee Breast and Cervical Screening Program

### General Eligibility Guidelines

- Female
- At or below 250% poverty guidelines
- Uninsured or underinsured (insurance will not pay for needed screening or diagnostic services)
- No TennCare
- No Medicare
- Ages 40-64 \* See below for age break down for services since some services are available for women <40

Persons in Family	Monthly	Annual
1	\$3,038	\$36,450
2	\$4,108	\$49,300
3	\$5,179	\$62,150
4	\$6,250	\$75,000
5	\$7,321	\$87,850
6	\$8,392	\$100,700
7	\$9,463	\$113,550
8	\$10,533	\$126,400

<b>Breast Screening Eligibility</b>
<b>Age 50-64:</b> eligible for screening mammogram
<b>Age 40-49:</b> eligible for screening mammogram <b>only if</b> <ul style="list-style-type: none"> <li>• Pt has had breast cancer before, or</li> <li>• If pt. has a mother, sister, or daughter who has had breast cancer</li> </ul>
<b>Age &lt;40:</b> not eligible for screening mammogram
<b>Ages 18-64</b> are eligible for diagnostic testing if they have symptoms suspicious for breast cancer.
*Ladies under age 40, must have approval from regional coordinator. To qualify, ages 18-39 must have one of the following: discrete palpable mass, nipple discharge or changes, breast pain, or abnormal mammogram and/or ultrasound.

<b>Cervical Screening Eligibility</b>
<b>Age 40-64:</b> eligible for pap if she still has her cervix or if she has had a hysterectomy for cervical cancer/precancer.
<b>Age &lt;40:</b> BCS cannot pay for paps, unless it is a follow up to a colposcopy.
<b>Ages 18-64</b> with abnormal paps may qualify for enrollment for colposcopy (diagnostic testing).

Individuals diagnosed with breast or cervical cancer or precancerous conditions may be eligible for Presumptive TennCare immediately. To be eligible for Presumptive TennCare through the TBCSP program, the individual must also meet the general eligibility guidelines.