

Opinion Piece: Comprehensive breast cancer treatment goes beyond medical procedures

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When a woman is diagnosed with breast cancer, the focus is typically on treatment plans including chemotherapy, radiation and surgery. While these are obviously critical, the mental implications of such a diagnosis also need to be taken into account. Ensuring women are supported during this incredibly trying time means looking holistically at their care and not just at the medical procedures necessary to save or prolong their lives.

An increasing risk

The number of women diagnosed with breast cancer in South Africa is increasing and breast cancer has been identified as a national priority. According to the [Cansa website](#), it is the most common cancer in women of all races, aside from non-melanoma skin cancer. It carries a lifetime risk of 1 in 25 in South Africa, with approximately 19.4 million women aged 15 years and older living at-risk of being diagnosed.

Mental health is as important as physical health

While medical schemes provide cover for oncology, treating the physical disease is only part of the battle. A diagnosis of breast cancer is devastating and it is essential to help women deal with the mental impact of being diagnosed with a critical illness.

It is also important to remember that critical illness diagnosis has an impact on families, not just the person diagnosed. The primary carer for the patient is placed under significant strain, mentally but also often financially, meaning that they may not seek the help they need.

Financial wellbeing is critical too

While many cancer treatments are covered as Prescribed Minimum Benefits (PMBs), this is not always the case, and even if it is, there are certain limits involved. Medical aids typically provide cover in one of two ways.

The first specifies an overall annual limit per person or per family, and after this is depleted, patients have access only to PMBs until the renewal of the cycle. Depending on the medical aid this may be at the start of the next calendar year, or after a 12-month rolling period. If the treatment is not covered as a PMB, then all expenses will be out of pocket. The second method provides a specified Rand value for treatment, for example R200 000 per person per annum, after which any ongoing treatment that is not classified as a PMB will attract a 20% co-payment until the end of the calendar year or 12-month period.

Either of these options could leave a patient out of pocket for significant expenses related to ongoing treatment. This is particularly true when biological cancer drugs are involved as these are extremely expensive and have the potential to deplete a member's oncology benefit fast. Paying a 20% co-payment on treatment adds up to crippling sums, especially during these times when most families have experienced a reduction in disposable income.

The benefits of gap cover

Gap cover can help medical scheme members to look after their mental and financial health in the face of a breast cancer diagnosis.

Additional cover for trauma counselling means that women can get professional mental health support to help them process the diagnosis and come to terms with it. Certain gap

cover options also offer a special cancer benefit that gives policy holders a once off payment for the first diagnosis of cancer. This money can be used however a family sees fit, whether to cover food and transport or to take a holiday to make memories before treatment begins. This can be beneficial to a member's mental health and stability during treatment.

When it comes to medical expense shortfalls for treatment, gap cover can assist with the continuation of the oncology treatment and radiation up to the overall annual limit of the gap cover, or until the benefit is renewed on the medical scheme. This covers medical expense shortfalls when annual oncology limits have been reached as well as co-payments related to ongoing treatment.

Women's benefits for women's cancer

The generic benefits of gap cover apply not only to breast cancer but to other cancer diagnoses as well. However, in light of increased incidences of breast cancer and its unique effect on women, there are also specific breast cancer benefits that can be accessed via certain gap cover options.

Prevention cover is specifically for the cover of a prophylactic mastectomy. If a woman is the carrier of genetic breast cancer markers with a strong family history of breast cancer, and the preventative removal of breast tissue is indicated, gap cover will assist with the medical expense shortfalls related to this procedure.

Reconstruction cover is related to both prevention and treatment of breast cancer. With any breast cancer diagnosis there is generally surgery involved to remove affected breast tissue. While the reconstruction of the affected breast is covered as a PMB, a bilateral prophylactic mastectomy, where both breasts are removed for preventative purposes, will not be covered. In addition, any asymmetry of the breasts resulting from removal and reconstruction after the bilateral prophylactic mastectomy will not be covered. This has an additional mental health impact on women. Gap cover will assist with a single lifetime benefit pay out to cover the reconstruction.

Holistic care for long-term treatment and wellbeing

With the risk of breast cancer growing, it is increasingly important to provide women with all the care they need from start to finish. Cancer treatment is not just about chemotherapy, radiation or surgery, but caring for the wellbeing of the entire individual throughout their journey. Gap cover plays an essential role in ensuring women can take care of their mental, financial and physical health in the event of a breast cancer diagnosis. In order to ensure that you are correctly covered speak to your financial advisor about which gap cover option correctly complements your medical scheme option.