Let's face it—health care can be pricey. If you have insurance, there may be out-of-pocket costs and things you need that aren't covered by your plan. If you don't have insurance, you may find yourself skipping a yearly check-up or a prescription to save money.

Whatever your insurance status, here are some tips to stay on top of your breast health without breaking the bank. Your health is worth it.

What is health insurance?
Health insurance is when an insurer makes a legal agreement to cover some or most of your health care costs for a certain price. That price is called a premium.

If you have insurance through your job, the premium may be paid by your employer. If not, you may buy insurance on your own or through a group. Health insurance can also be provided by the federal or state government, such as Medicare (for people over age 65) or Medicaid (for people with a low income).

What if I don't have health insurance?
First things first: whatever your current health or financial situation, it's smart to have health insurance. And thanks to the Affordable Care Act, there are more ways to get insured than ever.

Even if you don’t think you can afford insurance, take a few minutes to explore your options on HealthCare.gov. Depending on your income and what state you live in, you might be able to get help affording a plan through the marketplace, or you might qualify for Medicaid.

If you can get coverage through the marketplace or Medicaid, breast cancer screening (and a bunch of other preventive services) should be fully covered. If you can’t get insurance coverage right now, don’t give up on taking care of your breast health.

Resources for free and low-cost breast cancer screening
Regular screening is a huge part of staying on top of your breast health, especially if you’re 40 or older. To that end, these organizations are working to help women get screened whatever their financial and insurance situation.
• Susan G. Komen® Affiliates fund breast cancer education and screening projects in their communities for those who need it most. Find an Affiliate in your area.
• Call the Komen breast care helpline at 1-877 GO KOMEN (1-877-465-6636) Monday through Friday from 9:00 a.m. to 10:00 p.m. ET for help finding low-cost options in your area.
• Each October, during Breast Cancer Awareness Month, many mammography centers offer mammograms at reduced rates. To find a certified center in your area, search the FDA’s database.
• The CDC’s National Breast and Cervical Cancer Early Detection Program helps low-income, uninsured and underinsured women access breast cancer screening.
• Planned Parenthood offers clinical breast exams and referrals for mammography (and any follow-up testing, such as breast ultrasound).
• Some local chapters of the YWCA provide breast cancer education and screening to women with limited access to health services.

I have health insurance. Now what?

Tips for finding a doctor

If you have health insurance, a good first step is to choose a primary care provider (PCP) if you don’t already have one. A PCP is a doctor you go to for yearly check-ups and non-urgent health issues. They can refer you to specialists and help you navigate your health care. You can usually choose a nurse practitioner as your PCP or a doctor who specializes in Internal Medicine, Family Medicine or OB/GYN.

Start with your insurance. Many health insurance providers list doctors who accept your insurance on their website. These lists include medical specialty and gender. They may also include information about education, training, certification and personal interests. Depending on what kind of plan you have, this may be the best place to start looking for a PCP so you can be sure your insurance will cover your care.

Do some research. Here are some other ways to find doctors in your area:

• Ask friends, coworkers and family members who they go to for their health care. A recommendation from someone you trust is a great way to find a good doctor.
• If you have coverage through Medicaid or Medicare, the Medicare website can help you find local doctors who accept patients with Medicaid or Medicare.
• If you’re insured through your employer, human resources may have a list of doctors for your company’s health plan.
• Search for hospitals in your area and see if their websites list local doctors.

Check on board certification. Make sure the doctor you choose is board certified before you make an appointment. A doctor must have the training and knowledge to practice a medical specialty and pass a special exam to get board certified.

• The American Board of Medical Specialties (ABMS) oversees this certification. The ABMS online directory lets you check that a health care provider is board certified.
Administrators in Medicine maintains DocFinder, a database of U.S. health care providers. DocFinder lists a health care provider’s certification status and may list where they went to medical school and did their training.

**Ask questions.** The first time you meet a new doctor, take a few minutes to get to know them. You could ask questions like:

- What’s your philosophy about patient care?
- How long have you been practicing?

Even a short conversation will help you learn about your doctor’s abilities and see whether you have a personal connection. You can also take the opportunity to ask some questions about your breast health. If you don’t feel like your questions are answered respectfully and openly, don’t be afraid to keep searching for a doctor who makes you feel comfortable.

**Tips for dealing with health insurance**

Health insurance can be confusing, especially when you’re wondering if it will cover a service you’ve never had before. Here are some ways to stay on top of your care and make the most of your coverage.

**Get informed about your plan.** If you have insurance through your employer, your human resources department may be able to answer questions. They probably can’t deal with issues directly, but they may save you time by helping you figure out who to contact and what to expect. If your insurance isn’t through an employer, contact your insurance provider directly with questions, or see if they have the information you need on their website.

It’s good to have a sense of what costs you might need to pay before you go to an appointment. For example, you can ask your insurance company these questions:

- Is there a difference in coverage for “in-network” versus “out-of-network” doctors? (If there is a difference, make sure the doctor you’re seeing is in-network.)
- Exactly what costs does my plan cover—office visits, blood tests, mammograms, biopsies, counseling? Are there co-pays, deductibles or other out-of-pocket costs?
- What is the process for payment or reimbursement?

**Keep track of stuff.** Keep copies of claim forms, invoices and letters your insurance provider sends you. It’s also a good idea to keep a log of any phone calls you have with your insurer, noting:

- The date and time of the call
- The name and job title of the person you spoke to
- A brief summary of the call
- Any actions that were to result from the call

**Advocate when you need to.** If your insurance doesn’t cover something that’s important for your health, don’t be afraid to advocate for yourself. For example, the Affordable Care Act
requires all health insurance plans to cover yearly mammograms with no out-of-pocket costs for women ages 40 and older. If you are 40 or older and your insurance company says they won’t cover a mammogram, find out why not. You can also ask whether your doctor can do something to confirm your medical need.

**Get support if you need it.** If your health insurance denies a claim, you can get legal and possibly financial support from Patient Advocate Foundation (800-532-5274). You can also use their directory to find help if you have insurance but struggle to pay out-of-pocket costs.

Want to keep learning about affordable health care access? Visit Black Women’s Health Imperative for more resources.