

Solutions

Medical Underwriting At Work For You



MetLife

Underwriting Breast Cancer

Early Detection, Treatment Boost Odds of Survival

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Carol, 46, a high school teacher, is applying for term life and disability income insurance. Early last year, her mammogram showed a small right breast lesion. A biopsy confirmed ductal carcinoma in situ. Pathological features were favorable—it was small (1 centimeter), low grade and showed no comedonecrosis, i.e., ducts completely obstructed by tumor cells. The entire lesion was removed at biopsy, so more surgery was not needed. Since her biopsy, Carol's clinical exams and surveillance testing have been normal.

Jennifer, 51, an accountant, noticed a lump in her left breast five years ago. A follow-up mammogram showed a suspicious 3-centimeter lesion. A breast biopsy indicated a low-grade invasive carcinoma of the left breast. Following surgery and radiation, Jennifer continued with five years of Tamoxifen therapy. Since then, there has been no recurrence of the disease and testing has been negative. Jennifer is now applying for term life and disability income insurance.

Survival Rates Increased

Breast cancer remains a leading cause of death among American women. It is the second most common type of cancer in women, behind only skin cancer. One in eight women will develop breast cancer in her lifetime.¹ Fortunately, early detection and advanced therapies have increased survival rates for those diagnosed with breast cancer.

While the cause of breast cancer is unknown, there are some factors that may increase a woman's chance of developing the disease. Among these risk factors are²:

- Never having a child or having a first child after age 35
- Family history of breast cancer
- Being older than 50

- An inherited mutation in BRCA1 or BRCA 2 genes
- Prior history of LCIS (lobular carcinoma in situ)
- Obesity
- Drinking alcohol

Most breast cancer is discovered either by mammography or by a woman or her physician finding a lump in her breast. Once a breast lesion is identified, additional testing becomes necessary to rule out a malignancy. The majority of these lesions, fortunately, are benign. If breast cancer is found, treatment may include one or more of the following: surgery, radiation or chemotherapy. Overall, the five-year survival rates for early-stage breast cancers are over 90 percent.³ However, if the tumor becomes large (over 5 centimeters) or the lymph nodes or other distant sites are involved, survival rates drop sharply.

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If your Client has a History of Breast Cancer...

Here are a few questions you should ask your client diagnosed with breast cancer:

- When was the breast cancer diagnosed?
- What was the stage of the cancer?
- Was the cancer localized or had it spread to another location?
- Were any lymph nodes positive?
- What type of treatment was given (surgery, radiation, chemotherapy)?
- Are you or were you on endocrine chemotherapy such as Tamoxifen, Arimidex or Femara?
- Any recurrence of the cancer?
- Which doctor treated you for the cancer?
- When was your last follow-up evaluation for breast cancer?

1. breastcancer.org/symptoms/understand_bc/statistics.jsp

2. cancer.org/cancer/breastcancer/detailedguide/breast-cancer-risk-factors

3. cancer.org/cancer/breastcancer/detailedguide/breast-cancer-survival-by-stage

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Fortunately, with early detection through routine mammography and regular MD visits, breast cancer can be treated successfully.

The Morbidity Risk

Morbidity issues are common in those with a history of breast cancer. In the short term, there may be significant functional limitations due to the need for surgical recovery. In those requiring radiation or chemotherapy, side effects such as nausea and fatigue may also cause morbidity. In the long term, those with axillary dissection of the lymph nodes may face chronic arm pain and swelling, possibly causing functional limitations and restrictions of arm motion.

In women who chose reconstructive surgery, another period of recovery is required.

Psychiatric issues such as anxiety and depression are common in breast cancer, and may cause morbidity in both the short and long term.

Life Insurance Underwriting

Because Carol's breast cancer showed favorable features, she would qualify for a Standard rating.

Although Jennifer had a larger tumor, she had favorable pathological features including the histological grade of her

cancer, positive estrogen/progesterone receptor status and good test results five years after surgery. Therefore, she would qualify for a Standard policy with a temporary flat extra rating of \$10. Seven years after completing treatment, Jennifer's temporary rating would no longer apply.

Disability Income Underwriting

Carol would qualify for a 90- or 180-day elimination period with a 20 percent rating and a five-year benefit period limitation with an exclusion rider.

Jennifer could qualify for a 90-day elimination period policy with a 75 percent rating and a two-year benefit period limitation with an exclusion rider. A 180-day elimination period policy would carry the same benefit period limitation and exclusion rider along with a 50 percent rating.

Thanks to modern detection and treatment, women diagnosed with breast cancer often lead long and healthy lives. Many women diagnosed with breast cancer may be eligible for DI and Life insurance at favorable rates.

The cases presented here are hypothetical. Specific ratings will vary based on a client's complete medical history.

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