# **The Sage Screening Program**



The Sage Screening Program is a statewide comprehensive breast and cervical cancer control program whose primary objective is to increase the number of patients who are screened for breast and cervical cancer.

# What Sage pays for

The following services are free to eligible patients at participating facilities. Special arrangements may be needed for some services—please check with the Sage Follow-up Coordinator.

For reimbursable CPT codes, refer to <u>Sage Program Reimbursement Rates</u> (www.health.state.mn.us/diseases/cancer/sage/documents/sagereimbursement.pdf).

Visit <u>Sage Program Resources for Providers and Professionals</u> (<u>www.health.state.mn.us/diseases/cancer/sage/providers/index.html</u>) for more information.

# **Screening services**

- Office visit for breast and cervical exam
- Clinical breast exam (recommended but not required)
- Screening mammogram
- Pap smear: Every 3 years or every 5 years with HPV co-test age 30-64

# **Diagnostic services**

- Office visit for breast or cervical services (i.e., for exam or results counseling)
- Diagnostic mammogram
- Fine needle aspiration of breast lump, including pathology reading
- Colposcopy, including biopsy
- Breast ultrasound
- Breast biopsy
- Diagnostic services for HPV testing and endometrial biopsies—refer to Provider Manual or call the Sage Clinical Services team.

# Age exceptions for breast services

Sage services are intended for clients ages 40-64. However, we do recognize that there are some situations where services are indicated in younger clients. If a client under 40 has breast symptoms or a family history of breast cancer (self, parent, sibling, child), enroll the patient and Sage will cover their office visit and any other breast screening testing. If further follow-up is needed, the patient could also have a diagnostic mammogram, breast ultrasound, breast surgical consult or outpatient breast biopsy.

# **Eligibility**

- Breast cancer screening: ages 40-64
- Cervical cancer screening: ages 30-64
- Diagnostic services: ages 30-64
- People who have no insurance or are underinsured\*\*
- People whose income is within guidelines (they do not need to verify income)



#### \*\*Underinsured includes:

- Insurance that does not cover screening or insurance with unmet deductibles or excessive co-payments.
- Patients on Minnesota Medical Assistance (MA) do not need Sage coverage and are not eligible.

### **2025 Income Guidelines**

Household number	Monthly income	Yearly income
1	\$3,261	\$39,125
2	\$4,407	\$52,875
3	\$5,553	\$66,625
4	\$6,698	\$80,375
5	\$7,844	\$94,125
6	\$8,990	\$107,875
Add for each additional	\$1,146	\$13,750

### Income estimating

Self-employed or farmers should use their net income after deducting business expenses. Since monthly incomes may vary, encourage patients to use a current or recent month's estimate of their monthly income after business expenses. No documentation is required.

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