

## Breast Cancer Treatment Cost

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### How Much Does Breast Cancer Treatment Cost?

 **With Health Insurance:**  
Copays +  
10%-50%  
Coinsurance

 **Without Health Insurance:**  
\$15,000-  
\$50,000+

[Lumpectomy](#)

[Mastectomy](#)

[Breast Reconstruction](#)

[Radiation Therapy](#)

[Chemotherapy](#)

[Health Insurance](#)

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Breast cancer treatment usually involves surgery -- a lumpectomy or mastectomy -- sometimes followed by chemotherapy, radiation or other treatments.

#### Typical costs:

- For patients covered by health insurance, out-of-pocket costs for breast cancer treatment typically consist of doctor visit, lab and prescription drug copays as well as coinsurance of 10%-50% for surgery and other procedures, which can easily reach the yearly out-of-pocket maximum. Breast cancer treatment typically is covered by health insurance, although some plans might not cover individual drugs or treatments.
- For patients not covered by health insurance, breast cancer treatment typically costs **\$15,000 - \$50,000** or more for a [mastectomy](#) or **\$17,000 to \$35,000** or more for a [lumpectomy](#) followed by radiation.
- [Chemotherapy](#) can cost about **\$10,000 - \$100,000** or more, depending on the drugs, the method of administration and the length or number of treatments. For example, women on a [BreastCancer.org forum](#) report chemotherapy costs of **\$7,000 - \$40,000** per treatment.
- Depending on the individual case and the type and number of treatments needed, the total cost of breast cancer treatment, on average, can reach **\$100,000** -- or, in advanced cases, **\$300,000** or more. In a [BreastCancer.org forum](#), patients discuss total costs of their breast cancer treatment. For example, a [study](#) published in BMC Cancer found that the average total cost of care over a mean follow-up of 532 days was about **\$128,500** for women with metastatic breast cancer receiving chemotherapy as their primary treatment. This includes the cost of the chemotherapy drugs, additional drugs to help manage side effects, administration of the drugs and medical care for chemotherapy-related complications.
- The American Society of Clinical Oncology has a [guide to managing the costs of cancer care](#).

#### What should be included:

- Most breast cancer patients undergo [surgery](#) -- either a [lumpectomy](#), a [partial mastectomy](#), a [simple mastectomy](#) or a [modified radical mastectomy](#). (A [radical mastectomy](#) usually is not performed because a modified radical mastectomy removes less tissue and is about as effective.) The type of surgery performed typically depends on the size and stage of the cancer and other factors.
- Some breast cancer patients undergo [radiation therapy](#), either after surgery to reduce the chance of recurrence, as an alternative treatment if surgery cannot be performed, or if the cancer has spread.
- Some patients undergo oral or IV [chemotherapy](#), before surgery to help shrink the tumor, after surgery, or if surgery cannot be performed.
- Patients whose breast cancer cells have estrogen or progesterone receptors may undergo [hormone therapy](#), to inhibit the cancer cells' growth.

- The National Cancer Institute offers an [overview](#) of breast cancer treatments.

#### Additional costs:

- If a mastectomy is required, the patient might choose to get [breast reconstruction](#). This typically costs **\$5,000 - \$15,000** or more per breast for implants or from **\$25,000 - \$50,000** or more per breast for "flap" techniques using tissue from the patient's own body.
- Breast cancer patients will need regular follow-up doctor visits and screenings to check for recurrence. The American Society of Clinical Oncology offers [guidelines](#) for follow-up care that include doctor visits every three to six months for the first three years, and a [mammogram](#), which costs about **\$100**, every six to 12 months.

#### Discounts:

- Many hospitals give discounts of up to 30% or more to uninsured/cash-paying patients. For example, [Washington Hospital Healthcare System](#) in California offers a 35% discount.
- Some state or regional programs offer free treatment. For example, the Commonwealth of Pennsylvania Breast and Cervical Cancer Prevention and Treatment Program offers [free treatment](#) to uninsured or underinsured women living in Pennsylvania who meet income guidelines. And the Illinois Breast and Cervical Cancer Program offers [free treatment](#) to uninsured women aged 35-64 (or, in some cases, younger) who live in Illinois.
- The United Breast Cancer Foundation offers [grants](#) to help pay for treatment for qualifying patients, typically those with income below two and a half times the federal poverty level.

#### Shopping for breast cancer treatment:

- The American Society of Clinical Oncology offers an [oncologist locator](#) by state with the option to search for a breast cancer specialist. And the National Cancer Institute has a [search tool](#) for NCI-designated cancer centers.
- WebMD offers a [guide to the types of breast cancer specialists](#), and the National Cancer Institute offers a [guide to finding a doctor or cancer treatment facility](#).
- WebMD offers a [primer](#) on getting a second opinion for breast cancer diagnosis and treatment.
- Breastcancer.org offers [information on clinical trials](#).

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## How Much Does a Lumpectomy Cost?



**With Health Insurance:  
Copays +  
10%-50%  
Coinsurance**



**Without Health Insurance:  
\$10,000-  
\$20,000+**

[Breast Cancer Treatment](#)

[Mastectomy](#)

[Radiation Therapy](#)

[Chemotherapy](#)

[Health Insurance](#)

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A lumpectomy removes a tumor in the breast and some healthy tissue around it, without removing the breast. It typically is followed with [radiation therapy](#). A partial mastectomy is similar to a lumpectomy, but involves removal of more tissue.

### Typical costs:

- For patients covered by health insurance, out-of-pocket costs for a lumpectomy typically consist of doctor visit, lab and prescription drug copays as well as coinsurance of 10%-50% for surgery and radiation. A lumpectomy typically is covered by health insurance.
- For patients not covered by health insurance, a lumpectomy typically costs about **\$10,000 - \$20,000** or more. For example, [Dartmouth-Hitchcock Medical Center](#) in New Hampshire charges about **\$10,000** after a 30% uninsured discount, including a doctor fee of about **\$2,000**. [Saint Elizabeth Regional Medical Center](#) in Nebraska charges about **\$5,700 - \$8,500**, not including doctor fees. The hospital charges about **\$12,200 - \$17,100** for a partial mastectomy with lymph node removal. [Baptist Memorial Health Care](#) in Tennessee charges an average of about **\$19,000** for excision of a lump in the breast, without complications, not including doctor fees. [Kapiolani Medical Center for Women & Children](#) in Hawaii, charges about **\$12,800** for a partial mastectomy, not including doctor fees, but will reduce the bill to about **\$7,700** if paid in full within 30 days or **\$8,900** in 60 days. For a partial mastectomy with lymph node removal, the cost increases to about **\$16,700** -- or about **\$10,000** if paid in 30 days or about **\$11,700** in 60 days.
- In most cases, radiation is used in conjunction with a lumpectomy. According to the [Journal of the National Cancer Institute](#), it typically costs about **\$7,000** for whole breast radiation and a little about **\$15,000** for [intensity-modulated radiation therapy](#). Women on a breast cancer forum [discuss radiation costs](#).

### What should be included:

- A lumpectomy might be recommended for early-stage breast cancer where there is one small tumor. The patient usually receives either local anesthesia with sedation or general [anesthesia](#), and the surgeon removes the tumor and some surrounding breast tissue and possibly one or more lymph nodes for biopsy, to see if the cancer has spread. The outpatient procedure typically takes about two hours.
- A lumpectomy typically is followed by [radiation therapy](#) to try to destroy any cancer cells left behind.
- WebMD offers an [overview](#) of lumpectomy and partial mastectomy.

### Additional costs:

- Breast cancer patients will need regular follow-up doctor visits and screenings to check for recurrence. The American Society of Clinical Oncology offers [guidelines](#) for follow-up care that includes doctor visits every three to six months for the first three years, then less frequently, and a [mammogram](#), which costs about **\$100**, every six to 12 months. Patients on a forum at BreastCancer.org [discuss](#) the cost of follow-up doctor visits, which can range from less than **\$200 to \$400 or more each**.

### Discounts:

- Many hospitals give discounts of up to 30% or more to uninsured/cash-paying patients. For example, [Washington Hospital Healthcare System](#) in California offers a 35% discount.
- Some state or regional programs offer free treatment. For example, the Commonwealth of Pennsylvania Breast and Cervical Cancer Prevention and Treatment Program offers [free treatment](#) to uninsured or underinsured women living in Pennsylvania who meet income guidelines.
- The United Breast Cancer Foundation offers [grants](#) to help pay for treatment for qualifying patients, typically those with income below two and a half times the

federal poverty level.

### **Shopping for a lumpectomy:**

- The Society of Surgical Oncology offers a [surgical oncologist locator](#) with the ability to search for a doctor who specializes in breast cancer surgery.
- WebMD [recommends](#) choosing a surgeon who devotes more than 50% of their practice to breast cancer surgery.
- The National Cancer Institute offers a [guide](#) to finding a doctor or cancer treatment facility.
- BreastCancer.org offers a [guide](#) to deciding between a lumpectomy and a mastectomy.

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## How Much Does a Mastectomy Cost?



**With Health Insurance:**  
Copays +  
10%-50%  
Coinsurance



**Without Health Insurance:**  
\$15,000-  
\$55,000+

[Breast Cancer Treatment](#)

[Breast Reconstruction](#)

[Mammogram](#)

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Mastectomy is surgery to remove one or both breasts, usually in a patient who has breast cancer or a very high risk of developing it.

### Typical costs:

- For patients covered by health insurance, out-of-pocket costs for a mastectomy typically consist of doctor visit, lab and prescription drug copays as well as coinsurance of 10%-50% for the surgery. A mastectomy typically is covered by health insurance. However, some insurers have restrictions on mastectomy to prevent breast cancer. For example, [Aetna](#) considers prophylactic mastectomy medically necessary in patients with various risk factors, such as certain gene mutations.
- For patients not covered by health insurance, a mastectomy typically costs more than **\$15,000 - \$55,000** or more, not including breast reconstruction. For example, [BlueCross BlueShield of Tennessee](#) estimates a cost of more than **\$15,000** for a bilateral prophylactic mastectomy. [Saint Elizabeth Regional Medical Center](#) in Nebraska, charges about **\$14,000 - \$37,000** for a simple complete mastectomy. The hospital charges about **\$15,000 - \$32,000** for a modified radical mastectomy, which involves removal of breast tissue, nipple and some lymph nodes. Expect to pay about **\$37,000** for a radical mastectomy, which involves removal of breast tissue, nipple, underlying muscle and lymph nodes; costs can reach **\$50,000** or more if there are complications. Doctor fees and laboratory pathology costs can add up to **\$2,000** or more each to the total bill.

### What should be included:

- A [simple mastectomy](#) might be recommended for a small tumor, and if the cancer has not spread to nearby lymph nodes. The patient is placed under general anesthesia, and the surgeon removes the entire breast, nipple and areola. A hospital stay of at least one night typically is required.
- A [modified radical mastectomy](#) typically is recommended when the cancer has spread to lymph nodes near the breast. The patient is placed under general anesthesia, and the surgeon removes the breast, nipple, areola and nearby lymph nodes. A hospital stay of at least one night typically is required.
- In a [skin-sparing mastectomy](#), the surgeon removes the breast, nipple and areola, but leaves the skin in place. This typically is done when reconstruction is done immediately afterward, and both procedures can take up to six hours. If reconstruction is done, a hospital stay of five nights or longer might be required.
- The National Institutes of Health offers an [overview](#) of mastectomy.

### Additional costs:

- After a mastectomy, some patients will require [radiation therapy](#), which can cost from less than **\$10,000 - \$50,000** or more, or chemotherapy, which can cost up to **\$30,000** or more, depending on the drug.
- Many patients choose to undergo [breast reconstruction](#), which can be done at the same time as the mastectomy or months or even years later. This typically costs from **\$5,000 - \$15,000** or more per breast for implants or from **\$25,000 - \$50,000** or more per breast for "flap" techniques.
- Breast cancer patients will need regular follow-up doctor visits and screenings to check for recurrence. The American Society of Clinical Oncology offers [guideliens](#) for follow-up care that includes doctor visits every three to six months for the first three years, then less frequently, and a [mammogram](#), which costs about **\$100**, every six to 12 months.

### Discounts:

- Many hospitals give discounts of up to 30% or more to uninsured/cash-paying patients. For example, [Washington Hospital Healthcare System](#) in California offers a 35% discount.

- Some state or regional programs offer free treatment. For example, the Commonwealth of Pennsylvania Breast and Cervical Cancer Prevention and Treatment Program offers [free treatment](#) to uninsured or underinsured women living in Pennsylvania who meet income guidelines. The United Breast Cancer Foundation offers [grants](#) to help pay for treatment for qualifying patients, typically those with income below two and a half times the federal poverty level.

#### **Shopping for a mastectomy:**

- The Society of Surgical Oncology offers a [surgical oncologist locator](#) with the ability to search for a doctor who specializes in breast cancer surgery.
- The National Cancer Institute offers a [guide](#) to finding a doctor or cancer treatment facility.
- The National Institutes of Health offers a list of [questions](#) to ask about mastectomy and reconstruction.
- The National Cancer Institute has a [fact sheet](#) about preventive mastectomy for women who do not have breast cancer, but are at high risk.

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## How Much Does Breast Reconstruction Cost?



**With Health Insurance: \$200-\$12,000+**



**Implants, Without Health Insurance: \$5,000-\$15,000 per breast**



**Flap Techniques, Without Health Insurance: \$25,000-\$50,000 per breast**

[Biopsy](#)

[CT Scan](#)

[MRI](#)

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Breast reconstruction typically is performed to re-create one or both breasts after a single or double mastectomy. The [American Cancer Society](#) provides a detailed overview of breast reconstruction.

### Typical costs:

- Without health insurance, breast reconstruction using implants typically costs **\$5,000 to \$15,000** per breast, for a total of **\$10,000 to \$30,000** if both breasts are reconstructed. On [RealSelf.com](#), plastic surgeons discuss estimated total costs for bilateral implant reconstruction without insurance.
- Without health insurance, breast reconstruction with "flap" techniques (using tissue from the patient's own body to create new breasts) typically costs **\$25,000 to \$50,000** or more per breast, or **\$50,000 to \$100,000** for both sides. Total costs of **\$100,000 to \$150,000** are not uncommon.
- With health insurance, out-of-pocket costs for breast reconstruction total a few hundred to several thousand dollars. In some cases, costs can hit **\$10,000 to \$12,000** or more. Patients on a [breast cancer forum](#) discuss out-of-pocket costs for the most expensive surgeries.
- When done after a mastectomy, breast reconstruction is covered by health insurance. The federal [Women's Health and Cancer Rights Act of 1998](#) requires all U.S. health insurers and self-insured group plans that cover mastectomy to also cover post-mastectomy breast reconstruction, surgery on the other breast to create symmetry and treatment of post-reconstruction complications. Some states also have laws requiring coverage.

### What should be included:

- In some cases, reconstruction can be done immediately after the mastectomy; in other cases, especially if radiation is being used, the reconstruction is done months, or even years, after the mastectomy.
- With an implant, the surgeon usually stretches the skin by inserting a tissue expander under the skin and muscle and, over a four- to six-month period, slowly inflates it by adding saline. When the expansion is complete, the expander is surgically removed and replaced with a silicone gel or saline implant, usually in an outpatient procedure that takes an hour or two under general anesthesia, and requires two to four weeks off work for recovery.
- With flap methods, the surgeon removes skin, blood vessels and, with some older techniques, muscle, usually from the abdomen, back or buttocks, and uses that tissue to re-create the breast. These inpatient operations typically use general anesthesia, take four to 12 hours to perform, and require up to a week in the hospital and as long as two months off work. These procedures are complicated and require an experienced surgeon highly skilled in microsurgery. The [DIEP Flap](#) procedure is considered by some to be the state-of-the-art technique. Other options include the [SIEA Flap](#), the [TUG Flap](#), the [GAP Flap](#), the [TRAM Flap](#) and the [Latissimus Dorsi Flap](#). Which procedure is recommended depends on how much tissue the patient has in a given area, prior surgeries and other health issues. Typically, one or two additional outpatient surgeries (a few hours each) are required, months after the initial operation, for revisions -- smoothing out scars or injecting fat -- and nipple and areola creation. On a [breast cancer forum](#), patients discuss the different stages of surgery.

### Additional costs:

- An implant will need to be replaced after about 10 or 15 years; insurance typically covers replacement.
- Many patients must pay travel and hotel expenses for the initial consultation and at least two to three surgeries.
- Getting a nipple and areola tattooed -- usually several months after nipple reconstruction -- by a permanent makeup artist or plastic surgeon typically costs **\$200 to \$600** per breast; some providers offer the service free to breast cancer

survivors.

#### Discounts:

- The nonprofit [My Hope Chest](#) helps qualifying women pay for breast reconstruction. And the [United Breast Cancer Foundation](#) offers financial help for patients in need.

#### Shopping for breast reconstruction:

- A plastic surgeon performs breast reconstruction. Make sure the doctor is certified by the American Board of Plastic Surgery and has privileges at an accredited hospital, even if the surgery is not taking place there. The [American Society of Plastic Surgeons](#) and the [American Society for Aesthetic Plastic Surgery](#) offer referrals. Ask about the surgeon's experience and success rate, and ask to see before-and-after photos of previous patients. According to this guide on how to find a surgeon, from [Plastic Reconstructive & Microsurgical Associates](#), a surgeon should have performed at least 100 procedures and, in the case of flap procedures, should have a success rate (where the flap of tissue lives in its new location) of at least 97 percent.
- Possible risks include bleeding, swelling, infection, pain, scarring, necrosis of tissue (cell death) requiring more surgery, change in or loss of sensation, and reaction to anesthesia that could include death. Ask about specific risks for each type of procedure (such as an abdominal hernia or lifelong limits on lifting weight after the TRAM Flap procedure). [BreastReconstruction.org](#) provides surgeon-reviewed information and discussion forums for patients, and [BreastCancer.org](#) has a reconstruction discussion forum.

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