

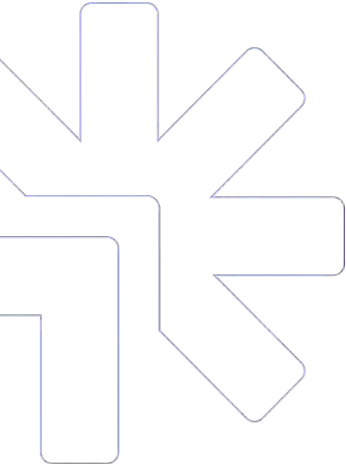
Closing the Cancer Gap

Health Inequity and How
Employers Can Help



Cancer prevention, diagnosis, and treatment outcomes remain stubbornly dire for underserved and hard-to-reach populations. But employers are in a powerful position to address the health inequities and social determinants that shape those statistics—and affect meaningful change in employee health.

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Health Equity in Cancer Screening and Care

The global pandemic and the national reckoning for racial justice have shined a new light on health equity, bringing terms like “social determinants of health” and “health disparities” more prominently into the cultural conversation. In response to this wider societal problem, addressing social inequities is becoming a top strategic priority for benefit managers.

Cancer—one of the most-feared illnesses¹—is an area where change is both possible and impactful, especially as it impacts a huge swath of the workforce.²

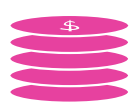


will **develop cancer** in their lifetime.³

Despite significant strides in cancer detection, smoking reduction and treatment—contributing to a 32% drop in the cancer death rate over the last 28 years—disparities along racial, ethnic, geographic and socioeconomic lines persist.⁵

Taking action isn't only a moral imperative, but also a business one. The Northeast Business Group on Health notes that "employers report a level of complexity in managing employees' cancer-related needs beyond that associated with any other type of disease or condition," due, in large part, to the related costs.⁶

\$125B
 was spent by employers for **cancer treatment.**⁶

\$139B
 is lost to absenteeism and **diminished productivity.**⁶

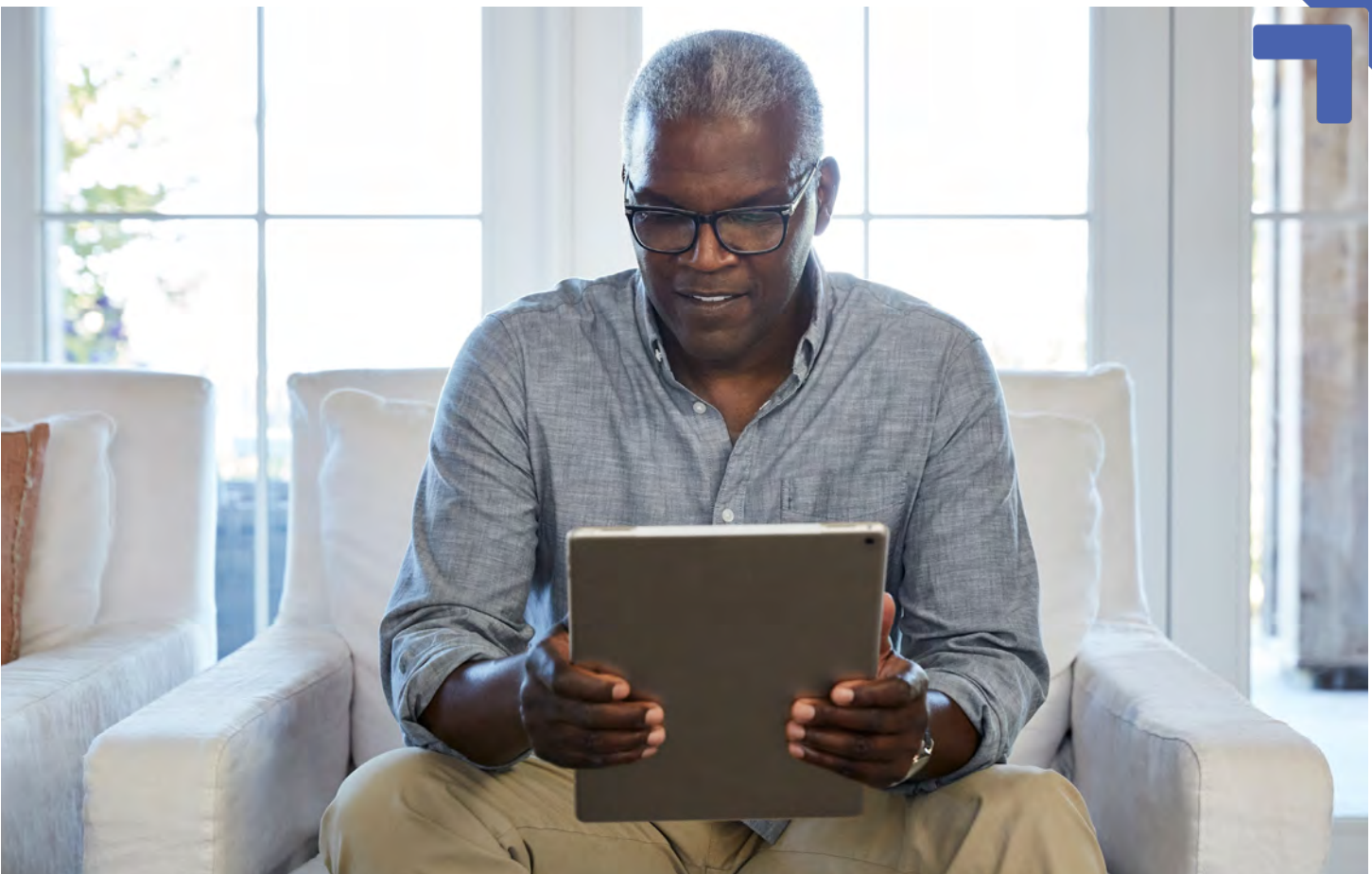
COVID-19 has only exacerbated the issue, with nearly one-third of Americans slow to reschedule the recommended cancer screenings they skipped during the early days of the pandemic. As a result, it's estimated there could be at least 10,000 additional deaths attributed to breast and colon cancers alone over the next decade.⁷

Who Is Affected by Cancer Disparities?

Breakthroughs in cancer detection, smoking reduction and treatment advances have helped slash cancer deaths by nearly one-third over the past three decades.⁵ Yet parity has been more elusive, and some groups continue to face higher risks, later diagnoses, and poorer outcomes.

- **Rural Americans** face a higher risk of certain cancers and, in part because they tend to have fewer nearby options to access care than their urban counterparts, have lower rates of both preventive care adherence and cancer screening compliance.⁸
- **LGBTQ Americans** have higher lifetime rates of certain cancers across all racial and ethnic groups.⁹
- **Hispanic Americans** are nearly twice as likely to be diagnosed with and die from liver cancer than white Americans. They also face double the cancer death rate from stomach cancer.¹⁰
- **Black Americans** suffer worse cancer death rates than all other racial and ethnic groups for many cancer types. This is partly due to delayed diagnosis and less consistent follow-up.¹¹
- **Native Americans/Alaska Natives** have higher death rates from kidney cancer than white Americans. They also have higher rates of liver and bile duct cancer.¹²
- **Asian Americans/Pacific Islanders** are at least twice as likely to die from stomach cancer compared to non-Hispanic white Americans.¹³

Employers would be wise to control what they can—namely, making cancer prevention and detection a priority across their workforce, and supporting those going through treatment. An effective and equitable strategy, though, involves understanding the deep and often complex roots of cancer disparities and then shaping prevention and detection strategies with the harder-to-reach and underserved populations front of mind.



Social Determinants of Health (SDOH)


Researchers estimate that up to 20% (at most!) of an individual's health is shaped by medical care.¹⁴ That means the vast majority of health is steered by health-related behaviors, socioeconomic factors, and environmental factors.


Defining Social Determinants of Health¹⁵


SDOH: the complex array of factors that make each of us more or less likely to experience certain health issues.


Some of these factors are deeply entrenched, such as race or socioeconomic background. Others are more mutable and can be mitigated with strategic interventions.


While there's no universal list of the social determinants of health that can affect people, experts generally agree it includes these five factors.¹⁵

 **Economic stability**, such as employment status, how much is spent on housing, and whether they have a disability that might prevent them from keeping a job.¹⁶

 **Education access and quality**, which largely applies to children—and the influence of their educational foundation on what follows.¹⁷

 **Healthcare access and quality**, such as having a primary care provider, something roughly 25% of Americans don't have.¹⁸

 **Neighborhood and built environment**, including everything from the presence of unsafe water or air to the existence of nearby natural parks.¹⁹

 **Social and community context**, which spans a person's support systems and interpersonal relationships, such as religious affiliations or whether they're a caregiver.²⁰



**SOCIAL DETERMINANTS
OF HEALTH**



CASE STUDY

Black Americans and Lung Cancer

To appreciate how health is shaped by so much more than biology and luck, let's examine lung cancer. It's the second most-common type of cancer in Black Americans and the leading cause of cancer death—yet the majority of cases are preventable.¹¹ More than 80% of lung cancer deaths are attributed to cigarette smoking, according to research published by the Centers for Disease Control and Prevention.²¹

But while Black Americans are slightly more likely to use tobacco than white Americans,²² even that lifestyle habit is hugely shaped by structural and economic inequities:

- Tobacco companies have historically marketed more aggressively to people of color, particularly menthol cigarettes, which some research shows may be more addictive.²³
- Areas with large racial minority populations tend to have more tobacco retailers.²³
- According to the CDC, retail outlets in Black neighborhoods tend to give more shelf space to menthol products.²³

Black smokers are less likely to report receiving physician advice to quit or using prescription cessation medications.²⁴ And when cancer hits, those systemic health inequities continue. Studies have also shown that surgery is recommended less often to Black individuals with early-stage lung cancer, though that treatment is best correlated with survival outcomes.¹¹

While the FDA has proposed rules to prohibit menthol in cigarettes in April 2022—a move it estimates would save as many as 238,000 African-American lives—the outcomes of these layered disparities are still distressing.²⁵

Compared with white Americans, Black Americans are:

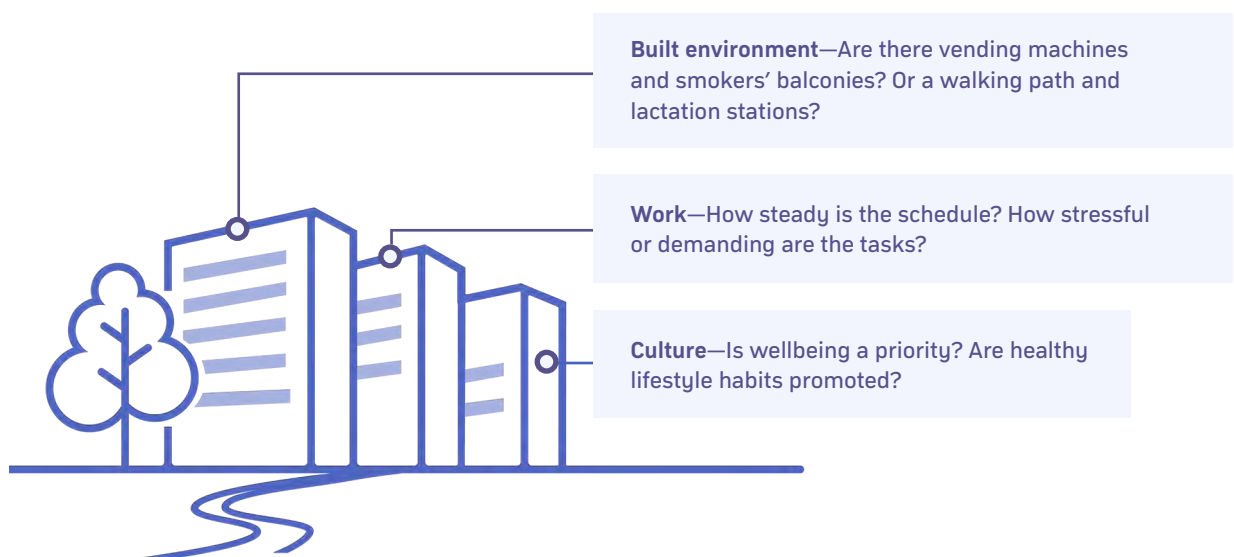
- 18% less likely to be diagnosed early.²⁶
- 23% less likely to receive surgical treatment.²⁶
- 21% less likely to survive five years.²⁶

An employer might not be able to dismantle the historical racism that makes a Black American more likely to encounter tobacco advertising. But it can partner with their Black employee resource group to bolster awareness of cessation programs among relevant employees—and combine that approach with other efforts to prevent and detect cancer early. This kind of targeted approach can go a long way in giving employees a better chance at continued health.

Workplace Impact on Employee Health

Employers won't be able to unravel or erase all of the SDOH negatively impacting their workforce. But all employers can promote greater health and equity by adjusting the levers they control. The impact may be greater than expected because, for many, work is a dominant backdrop to their day-to-day lives—particularly for the sixty percent of Americans working in jobs that can't be done remotely.²⁷

Where someone works can have a large impact on their health.



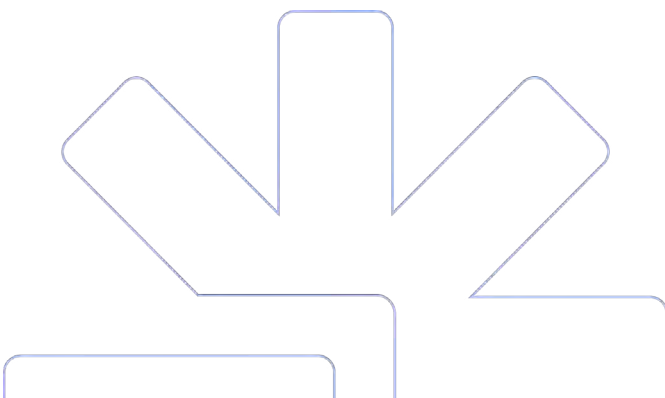
People touched by negative SDOH are more likely to experience preventable chronic conditions, such as hypertension and Type 2 diabetes.²⁸ These conditions are costly and life-impacting on their own, but research shows they're also strong predictors of cancer.²⁹

There's no question that an employer's benefits portfolio also plays a major role in the fight to prevent, detect, and treat cancer. Access to quality healthcare is table stakes, of course. That allows for individuals to stay up-to-date on recommended preventive screenings, and also spot and address conditions that might put those employees at greater risk for cancer. But employers would be wise to assess their portfolio beyond mere health coverage.

Consider benefits beyond basic health coverage:

- Are there robust offerings that take aim at modifiable risk factors, such as smoking, drinking alcohol, and managing obesity?
- Are there mental health benefits that might help employees better manage stress and safeguard their sleep?
- Are there benefits available, perhaps for employees at higher risk of cancer, to help them detect the disease earlier, when treatment outcomes tend to be more favorable?

Just as SDOH can be a complicated tableau of factors, all influencing and amplifying one another, an employer's benefits, policies, and workplace act in concert to help shape if, how, and when someone finds themselves facing cancer.



Employer Action Plan: Cancer Prevention

Benjamin Franklin famously stated, "An ounce of prevention is worth a pound of cure." For cancer, this could not be more true.

And many of the steps employers can take to help employees lower their cancer risk also set them up for better overall health, including the decreased risk of heart disease and diabetes. The potential savings for employers, then, extend beyond cancer-related costs, to other costly conditions as well.^{[30,31](#)}

Next, 4 ways to make cancer prevention benefits more accessible for your employees.

01. Understand Your Unique Organizational Needs

First and foremost, it's important to get a clear picture of your organization's current areas of opportunity.

- Work with benefit vendors to develop a data set of highest spend and largest workplace impact across all employee populations.
- Capture employee use of preventative services such as health screenings, diabetes, immunizations and cancer screenings, outcomes measures, and participation trends to identify gaps in care.

Equity Boost:

Consider overlaying key population health indices (the CDC's [diabetes](#) and [cancer](#) statistics reports) to build an "outside-in" perspective. This can help strengthen your case for SDOH investment and help inform prospective longer-term strategic initiatives.



02. Prime the Space for Healthy Habits

Someone's surroundings both subtly and profoundly impact their habits. Try to assess the workplace through fresh eyes.

What areas can be retooled to minimize unhealthy habits and nudge employees toward taking healthy actions instead?

Incorporate more health nudges:

- Swap vending machines of sugary drinks for more water stations.
- Add a simple sign by the elevator encouraging people to take the stairs.
- Install walking paths to support walking breaks and meetings.

Designating the workplace as smoke-free is perhaps one of the most meaningful steps employers can take to safeguard employee health, because it lowers smokers' tobacco use, minimizes secondhand-smoke exposure, and, research shows, increases the success rate of those trying to quit.

Equity Boost:

Per CDC recommendation, use culturally appropriate education efforts to raise awareness of the health effects of smoking and secondhand smoking.

- Reach out to underserved communities to promote tobacco-cessation programs and resources.
- Train managers on the health disparities that result when policies aren't consistently enforced.³²



03. Amplify Benefits Engagement

Weight-loss programs, smoking-cessation assistance, and on-site biometric screenings: many employers offer a robust benefits portfolio, but utilization may not be uniform.^{33,34} Tailored outreach—that makes available benefits easy to access and easy to understand—can help bridge that gap.³⁵

Consider posting to internal social media groups and connecting with ERG leaders to help get the word out. Prioritize benefits that address the underlying health challenges that put vulnerable populations at higher risk of cancer.

For instance, employers looking to help rural employees more easily access care might heavily promote digital health tools and on-site screening opportunities. Because LGBTQ employees generally attend fewer preventive appointments and are more likely to be smokers, employers looking to increase utilization for this group might focus on promoting telehealth resources and smoking cessation programs.^{36,37}

Equity Boost:

Audit your wellness communications and benefits materials to assess whether the photos and language featured in those materials reflect the diversity of your workforce and affirm the company's commitment to health care equity for all employees.³⁸

Apply a similar scrutiny to third-party benefits vendors and communications. You may not be able to directly control what those materials look like, but you can speak up if you spot an issue.



04. Scrutinize Schedules

Because night-shift workers endure prolonged disruption of the body's natural circadian rhythm, they risk harming the biologic systems that can help prevent cancer.³⁹ But schedules needn't be that extreme to impact a person's health:

- Work schedule uncertainty can impede healthy sleep patterns because it increases worker stress and disrupts home routines.^{40,41}
- Stress and insufficient shut-eye can increase risk of obesity, depression, and Type 2 diabetes.⁴²

As researchers noted, **"chronic uncertainty about the timing of work shifts appears to have a pernicious influence on sleep quality and, given its prevalence for low-wage workers, potentially contributes to stark health inequalities by socioeconomic status."**⁴¹

While not all businesses are able to offer employees set schedules, consider:

- Adjusting processes to provide employees more notice or predictability.
- Surveying employees about their availability and preferences.
- Using mobile apps that allow employees to swap and request shifts.

Equity Boost:

Even for employees who benefit from working set hours, schedule flexibility can mean the difference between accessing care or deferring it indefinitely.^{43,44}

- If offered, promote flexible schedules for healthcare needs in wellness communications and to ERG groups for underserved populations.
- Promote available wraparound benefits, such as free rideshare services to healthcare appointments.



Employer Action Plan: Cancer Detection

2-4x

Studies estimate that **costs when cancer is detected at a later stage are two to four times greater** than when it's detected early on.⁴⁵

3x

Colon cancer treatment is **three times more expensive** when the disease is detected at stage 4 than when caught at stage 1.⁴⁶

\$26B

Tallying the potential savings, one analysis estimated national cost-savings from early cancer detection at **\$26 billion per year**.⁴⁷

Next, 4 ways to make cancer detection benefits more accessible for your employees.

01. Up the Communications Cadence

Benefits leaders who launch cancer-prevention campaigns only during Breast Cancer Awareness month are missing a huge opportunity to educate and empower employees the other 11 months of the year. Educate employees on the importance of cancer screenings throughout the year and, to break through employee apathy or ambivalence, stretch beyond the usual wellness emails and HR newsletters.

Additional opportunities to communicate the importance of cancer screening:

Q1.	FEBRUARY— MARCH—	Cancer Prevention Month International Women's Day
Q2.	APRIL— JUNE—	National Minority Health Month National Black Family Cancer Awareness Week, National Cancer Survivors Day, Men's Health Month
Q3.	AUGUST— SEPTEMBER—	Cervical Health Awareness Month World Lung Cancer Day, Ovarian Cancer Awareness Month
Q4.	NOVEMBER—	Pancreatic Cancer Awareness and Lung Cancer Awareness Month

Equity Boost:

Education materials and outreach efforts should reflect the full diversity of your workforce, of course. If screening reminders are coming directly from an insurance plan, touch base to ensure materials like screening reminders will connect with your employee populations.

A mix of universal stats and targeted stats can create more connection—and hopefully action. For instance, about 1 in 17 American women will be diagnosed with lung cancer in their lifetime.⁴⁸ But for an employee living in rural Kentucky, which has the highest lung cancer incidence rate in the country and a death rate from the disease that's approximately 35% higher than the national average, a state-level stat is that much more powerful.⁴⁹

CASE STUDY

How the Michigan Cancer Consortium Increased Screening Rates

When the Michigan Cancer Consortium challenged organizations to increase workforce cancer screening rates, one found that simply mailing postcard reminders bumped screening rates from 67% to 88%. Another deployed the same tactic specifically for those employees who were overdue for a screening, and found that 25% had completed the screening within a year.⁵⁰ One state department of health suggests including screening reminders in unexpected communications, such as birthday cards and on pay stubs.⁵¹



02. Reduce Out-of-Pocket Screening Costs

While the Affordable Care Act ensured that any preventative service with a grade "A" or "B" from the US Preventative Services Task Force was covered 100%, there may still be employees putting off screenings for fear of the financial impact.⁵² Indeed, researchers found that when employers reduced the out-of-pocket costs for breast cancer screening, for instance, screening rates increased.⁵³

- Launch a dedicated campaign clarifying that cancer screenings are covered by the workplace health plans and will result in no out-of-pocket costs.
- Create programs that provide paid time off specifically for cancer screenings to offset lost wages.

Equity Boost:

Bringing cancer screenings to the workplace, when possible, eliminates the financial burden of paying for childcare or transportation to attend a screening appointment.⁵⁴

- Partner with local healthcare providers or benefit vendors to conduct on-site screenings for your workforce, with strong employee participation.
- Survey employees from vulnerable groups about what would help them follow through on getting up to date on cancer screenings and take action where possible.



03. Spotlight Employee Stories

Even thinking about cancer may cause fear and anxiety in employees, which can make following through on screening appointments more difficult. Shining a light on employees who have or had cancer, and allowing them to share their firsthand stories of how early detection made a difference, can help humanize the topic, according to the American Cancer Society, which shares such stories on their website.⁵⁵

If you offer additional cancer screening benefits, consider partnering with the vendor to develop patient testimonials and other content.

Equity Boost:

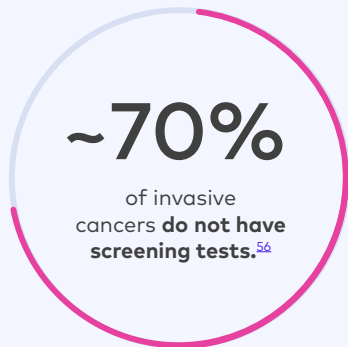
Cast a wide net for contributor testimonials and aim to build a roster that reflects more vulnerable and overlooked employee populations.

- If the first call for volunteers yields a bumper crop of women, for instance, how can you target your outreach to encourage more men to also participate?
- If the company's Cancer Survivors ERG is largely filled with stories of breast cancer, can you expand your outreach to engage other types of cancer as well?

That added effort up front will help these stories—whether shared by webinar, newsletter, or live health event—resonate with employees.⁵⁵

04. Embrace Benefits Breakthroughs

Current recommended cancer screenings are powerful, potentially life-saving procedures. But they are recommended for only 5 types of cancers.



That means many cancers go undetected until they have progressed to an advanced stage—when treatment costs are higher and outcomes are more often poor.

Recent innovations in cancer detection aim to change that. With new understanding from the field of genomics (the field of biology focusing on the structure, function, evolution, mapping, and editing of genomes), such tests can use a simple blood draw to complement routine screening tests recommended by a healthcare provider. They examine a person's blood for a shared cancer signal found on DNA fragments from a tumor that are associated with cancer, including many cancer types not screened for today.

Such early-detection tests can start an employee on their journey to diagnosis and treatment earlier than they might be otherwise.

Equity Boost:



Target your efforts: try segmenting for those most at risk for the disease. You might determine that employees have to meet specific demographic or health parameters in order to be eligible for the benefit, or try piloting new benefits offerings with specific demographic groups.

*GRAIL Data on File GA-2022-0083-MR. Study demographics included 314 respondents, age 40+, who were employed full-time at larger organizations.

A New Path Forward: Multi-Cancer Early Detection

Through a simple blood draw, Galleri® reduces barriers to access when it comes to cancer screening. All cells in our body, including cancer cells, release DNA fragments known as cell-free DNA into the bloodstream. DNA from cancer cells have specific methylation patterns that identify it as cancer. Methylation patterns also contain information that allows prediction of where in the body the cancer signal is coming from to guide diagnostic next steps.^{58,59}

In a case-controlled clinical study, Galleri detected a cancer signal shared by more than 50 types of cancer.⁵⁸⁻⁶⁰ In the same study, Galleri had high sensitivity for several cancer classes with significant disparities in outcomes compared to White Americans. This included **high sensitivity for liver/bile-duct cancer (93.5%), stomach cancer (66.7%), and cancer of the colon/rectum (82.0%).**⁵⁹

Detecting cancer early, before symptoms appear, increases treatment options.

That kind of breakthrough is noteworthy in itself, but no benefit can move the needle on employee health if it isn't designed with healthy equity in mind.

The Galleri test is designed to help employees at elevated risk of cancer get the information that they need to determine next steps with their healthcare providers.

The Galleri test does not detect all cancers and all cancers cannot be detected in the blood. False positives and false negatives do occur.



The Galleri test provides ease of access to cancer screening.

- The Galleri test can be ordered by healthcare providers from anywhere in the United States.
- The blood draw can be done at one of more than 6,600 reference laboratories across the country or, if an employee prefers someone come to them, via a blood draw scheduled at an employee's home.
- On-site blood draws for Galleri tests can be organized at company headquarters or large worksites, included as part of the Galleri test experience, allowing the widest possible access for eligible employees.

And from helping eligible employees schedule a test to follow-up consultations after they get results, the Galleri test experience is designed to support employees at each step—allowing employers to broaden their benefits portfolio without fear of excessive administrative burden.

A Straightforward Employee Experience



01 Request the test from our telemedicine partner



02 If eligible, receive a collection kit



03 Provide your sample



04 Receive your results

The test experience is designed to guide employees throughout the entire screening process—from requesting the test to receiving results—to support turning insights into action. Those with a “Cancer Signal Detected” result will have access to the support they need to avoid falling through the cracks, including post-test consultation, expert peer-to-peer clinical support for providers, and individual 1:1 follow-up from a GRAIL patient advocate.

To find out more about the Galleri multi-cancer detection test, visit galleri.com/employers.

Summary: A Rallying Cry for Equity-Minded Employers

The past few years have brought unprecedented attention to the pressing issue of health inequity—an issue that touches every corner of our country and every diagnosable disease, including cancer. The social determinants of health that underpin many of the disparities in cancer prevention and detection won't change overnight. But change is possible—and it's happening.

Employers, as both benefits curator and day-to-day cornerstone, are uniquely positioned to join the push for positive change by making health equity a strategic priority.

When it comes to cancer, taking steps to help underserved and vulnerable employee groups better prevent and detect the disease can make a significant difference. And while there's no denying that doing so can also yield considerable savings in medical spend and indirect costs, the true goal is both clear and urgent: to help all employees live their longest and healthiest lives possible.

Discover if this screening test is a good fit for your employees

Contact us to find out more about the Galleri test—and how to target screening disparities that exist today. We also offer comprehensive marketing campaigns and wraparound support services to integrate this benefit into your organization.

The Galleri test is added to cancer screening tests recommended by a healthcare provider



[https://www.galleri.com/
employers/learn-more](https://www.galleri.com/employers/learn-more)



employer@grailbio.com



Scan here for easy access

Important Safety Information

The Galleri test is recommended for use in adults with an elevated risk for cancer, such as those aged 50 or older. The Galleri test does not detect all cancers and should be used in addition to routine cancer screening tests recommended by a healthcare provider. Galleri is intended to detect cancer signals and predict where in the body the cancer signal is located. Use of Galleri is not recommended in individuals who are pregnant, 21 years old or younger, or undergoing active cancer treatment.

Results should be interpreted by a healthcare provider in the context of medical history, clinical signs and symptoms. A test result of "No Cancer Signal Detected" does not rule out cancer. A test result of "Cancer Signal Detected" requires confirmatory diagnostic evaluation by medically established procedures (e.g. imaging) to confirm cancer.

If cancer is not confirmed with further testing, it could mean that cancer is not present or testing was insufficient to detect cancer, including due to the cancer being located in a different part of the body. False-positive (a cancer signal detected when cancer is not present) and false-negative (a cancer signal not detected when cancer is present) test results do occur. Rx only.

Laboratory / Test Information

GRAIL's clinical laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) and accredited by the College of American Pathologists (CAP). The Galleri test was developed, and its performance characteristics were determined by GRAIL. The Galleri test has not been cleared or approved by the Food and Drug Administration. GRAIL's clinical laboratory is regulated under CLIA to perform high-complexity testing. The Galleri test is intended for clinical purposes.

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