the original layer of tissue, the cancer has become invasive and is categorized as local, regional, or distant stage based on the extent of spread. (For a more detailed description of these categories, see the footnotes in the table Five-year Relative Survival Rates (%) by Stage at Diagnosis, 2003-2009 on page 17.) For most cancers, clinicians use a different staging system called TNM, which assesses cancer growth and spread in three ways: extent of the primary tumor (T), absence or presence of regional lymph node involvement (N), and absence or presence of distant metastases (M). Once the T, N, and M categories are determined, a stage of 0, I, II, III, or IV is assigned, with stage 0 being in situ, stage I being early, and so on, with stage IV being the most advanced disease. Some cancers (e.g., lymphoma) have alternative staging systems. As the molecular properties of cancer have become better understood, tumor biological markers and genetic features have been incorporated into prognostic models, treatment plans, and/or stage for some cancer sites.

What Are the Costs of Cancer?
The National Institutes of Health (NIH) estimates that the overall costs of cancer in 2009 were $216.6 billion: $86.6 billion for direct medical costs (total of all health expenditures) and $130.0 billion for indirect mortality costs (cost of lost productivity due to premature death). PLEASE NOTE: These numbers are not comparable to those published in Cancer Facts & Figures prior to 2012 because in 2011, the NIH began calculating these estimates using a different data source: the Medical Expenditure Panel Survey (MEPS) of the Agency for Healthcare Research and Quality. The MEPS estimates are based on more current, nationally representative data and are used extensively in scientific publications. As a result, direct and indirect costs will no longer be projected to the current year, and estimates of indirect morbidity costs have been discontinued. For more information, visit nhlbi.nih.gov/about/factpdf.htm.

Lack of health insurance and other barriers prevent many Americans from receiving optimal health care. According to the US Census Bureau, approximately 48.6 million Americans (15.7%) were uninsured in 2011, including one in three Hispanics and one in 10 children (18 years of age and younger). Uninsured patients and those from ethnic minorities are substantially more likely to be diagnosed with cancer at a later stage, when treatment can be more extensive and more costly. The Affordable Care Act is expected to substantially reduce the number of people who are uninsured and improve the health care system for cancer patients. For more information on the relationship between health insurance and cancer, see Cancer Facts & Figures 2008, Special Section, available online at cancer.org/statistics.

*Per 100,000, age adjusted to the 2000 US standard population. †Uterus refers to uterine cervix and uterine corpus combined.
Note: Due to changes in ICD coding, numerator information has changed over time. Rates for cancer of the lung and bronchus, colon and rectum, and ovary are affected by these coding changes.
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