80% by 2018: Mid-Way Update

Richard C. Wender, MD
Chief Cancer Control Officer, American Cancer Society
Chair, NCCRT
Colorectal Cancer Screening Rate

Total Population, BRFSS

- 2002: 53.8%
- 2004: 56.7%
- 2006: 60.7%
- 2008: 64.2%
- 2010: 64.5%
- 2012: 65.2%
- 2014: 65.7%
Colorectal Cancer Screening Rate

ALL FQHCs-UDS
Colorectal Cancer Screening Rate

*FQHCs with CHANGE Grants to Increase Colorectal Screenings – UDS, 72 centers reported*

Learn more about the American Cancer Society’s CHANGE Grant Program: www.cancer.org/healthy/morewaysacshelpsyoustaywell/communityhealth/index
### Colorectal Cancer Screening Rate

<table>
<thead>
<tr>
<th>YEAR</th>
<th>Commercial</th>
<th></th>
<th>Medicaid</th>
<th></th>
<th>Medicare</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>HMO</td>
<td>PPO</td>
<td>HMO</td>
<td></td>
<td>HMO</td>
<td>PPO</td>
</tr>
<tr>
<td>2014</td>
<td>64.3</td>
<td>57.7</td>
<td></td>
<td>66.5</td>
<td>62.9</td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>63.3</td>
<td>56.5</td>
<td></td>
<td>64.3</td>
<td>60.8</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>63.3</td>
<td>55.8</td>
<td></td>
<td>62.1</td>
<td>58.4</td>
<td></td>
</tr>
<tr>
<td>2011</td>
<td>62.4</td>
<td>54.6</td>
<td></td>
<td>60.0</td>
<td>55.2</td>
<td></td>
</tr>
<tr>
<td>2010</td>
<td>62.6</td>
<td>47.6</td>
<td></td>
<td>57.6</td>
<td>41.0</td>
<td></td>
</tr>
<tr>
<td>2009</td>
<td>60.7</td>
<td>47.0</td>
<td></td>
<td>54.9</td>
<td>40.1</td>
<td></td>
</tr>
<tr>
<td>2008</td>
<td>58.6</td>
<td>45.3</td>
<td></td>
<td>53.1</td>
<td>41.8</td>
<td></td>
</tr>
<tr>
<td>2007</td>
<td>55.6</td>
<td>42.5</td>
<td></td>
<td>50.4</td>
<td>39.5</td>
<td></td>
</tr>
<tr>
<td>2006</td>
<td>54.5</td>
<td>42.1</td>
<td></td>
<td>53.3</td>
<td>47.1</td>
<td></td>
</tr>
<tr>
<td>2005</td>
<td>52.3</td>
<td>43.4</td>
<td></td>
<td>54.0</td>
<td>49.7</td>
<td></td>
</tr>
<tr>
<td>2004</td>
<td>49.0</td>
<td></td>
<td></td>
<td></td>
<td>52.6</td>
<td></td>
</tr>
</tbody>
</table>
The Strategic Plan

GOALS

OBJECTIVES

INITIATIVES

COHESION

Key: Critical.

Uncritical.

http://nccrt.org/about/strategic-plan/
4 Strategic Plan Goals to Achieve 80% by 2018

Consumers
Move consumers to action.

Systems
Use providers, payers, and employers to support screening.

Policy
Increase access and remove barriers to screening.

Process
Maintain momentum.
The NCCRT is relentlessly pursuing the 80% by 2018 goal. Here are a few of the highlights.

- The month opened with a Presidential Proclamation about March Colorectal Cancer Awareness month, Fight Colorectal Cancer ringing the closing bell at NASDAQ, and the Colon Cancer Alliance’s annual Dress in Blue Day on March 5th.
- Numerous wonderful new PSA videos were released by partners, including American Society of Gastrointestinal Endoscopy’s new National Colorectal Cancer Awareness month video that includes a message to get screened in 12 different languages; the Colon Cancer Alliance’s new video about screening options and the Center for Colon Cancer Alliance’s series of videos on Life’s Greatest Moments.
- The Colon Cancer Challenge Foundation and Michael’s Mission hosted the 2nd annual Early Age Onset of Colorectal Cancer Summit on March 18th and 19th, in New York City. Congratulations to Dr. Thomas Weber and the rest of his team for pushing the conversation on this important issue.
- On March 24th, Delaware’s Governor Jack Markell became the second acting governor in the nation to sign the 80% by 2018 pledge to help ensure 80% of eligible Delaware residents are screened for colorectal cancer by 2018.
- NCRC Steering Committee member, Dr. Mark Pochapin, joined Dr. Jon LaPook for a segment on CBS morning rounds on March 26th. (The colon cancer discussion starts at about 1:03).
- Register for the upcoming USA Colorectal Health Summit in which he joined numerous NCCRT members - Fight Colorectal Cancer, the American Society of Gastrointestinal Endoscopy and the American Society of Colon and Rectal Surgeons - in educating readers about colon cancer and encouraging them to take action when it comes to their personal health. The Summit will take place on April 29th and 30th.
- On March 29th, 80% by 2018 Champion Katie Couric authored a blog in the American College of Gastroenterology, American Journal of Gastroenterology.
- The NCCRT also partnered with the National Alliance for Hispanic Health to promote colorectal cancer screening with a joint English and Spanish Thunderclap on March 29th. The social media blasts reached over one million people.
- Numerous roundtables focused on colorectal cancer were hosted around the country, including California, Virginia, Arkansas, New York, Louisiana, Oregon and Washington State, continuing our momentum in the 80% by 2018 effort.
- A new Southeastern Colorectal Cancer Consortium launched in April with a well-attended symposium on April 20th through 22nd.
- The NCCRT tackled the pressing issue of colorectal cancer screening among American Indians and Alaska Natives by hosting a strategy meeting on the issue on April 25th in Traverse City, Michigan.
- Over 900 organizations have now signed onto the 80% by 2018 Pledge. The numbers grew quickly, with more than 50 pledges occurring in one week!
Consumers
New Communication Tools

- 2016 80% by 2018 Communications Guidebook Update
  - Summarizes market research
  - Provides tested messages
  - Provides new templates
  - Links to state-specific data sources

- More than 7,000 downloads since February – a new record for an NCCRT product!
New Communication Tools

• Hispanics/Latinos & CRC Companion Guide.
  - Tested Spanish messages.
  - Perceptions of CRC and barriers to screening among unscreened Hispanics/Latinos.
  - Recommendations for reaching unscreened Hispanics/Latinos.
  - Sample brochures, radio and TV scripts, etc.

• More than 600 downloads.

nccrt.org/80by2018/
New culturally competent tools are in development. The next set of tools will likely focus on Chinese and Southeast Asian men and women.
Partners Are Using the Messages

• Incorporated into GW social media guide.

• Used in Iowa Cancer Consortium’s Facebook ad.

• Incorporated into various health plan reminders.

• Washington state developed Spanish radio PSAs.

• Countless other examples.
Systems
Existing suite of materials available on NCCRT.org …
Existing suite of materials available on NCCRT.org ...
...plus new briefs for GIs and endoscopists, survivors and families, and women’s health providers.
Links of Care Pilots in Three Sites

Primary goal:
- Increase timely access to specialists for FQHC patients after a positive colorectal cancer screening result.

Key characteristics:
- Physician champion
- Defined capacity
- Shared burden
- Care coordination/ documented workflows
- Screening navigation
- Shared credit

Links of Care
August 17th, 2015
3:00pm EST
National Colorectal Cancer Roundtable Webinar

nccrt.org/webinars/
Links of Care Pilots Concluding This Year

• We are conducting a formal evaluation of the Links of Care Pilots.

• In September we will reconvene all the national organizations who initially supported the pilot to determine how to spread our lessons learned.
EHR Best Practices Workflow Guide: eClinicalWorks

Guidance on:
• CRC workflows and structured fields
• Documenting family history
• How and where to enter orders
• Generating referrals
• Entering test results
• Creating insurance claims

nccrt.org/eclinicalworks
EHR Best Practices Workflows Next Steps

• The guide was very well-received – and downloaded more than 2,400 times.

• We are developing a similar guide for NextGen, another major EHR used by FQHCs.

• Lynn Butterly is leading a separate effort to develop a guide for GE Centricity.
Employer Challenge Toolkit

Email
Debbie.Kirkland@cancer.org
for more information.
Working with Health Plans and Hospitals

Coming in 2016/2017:

• New CRC Best Practices Handbook for Health Plans, including case studies.
• New CRC Best Practices Guide for Hospitals, including case studies.
Policy
The Importance ofWaivingCost-sharing forFollow-upColonoscopies

- Makes the case for health plans to voluntarily waive cost-sharing for colonoscopies that follow a positive stool test.
- Eliminate financial incentive to choose the more expensive first line test.
- Potential to increase screening rate and improve quality measures.
Colorectal cancer is the second leading cause of cancer death among men and women combined in the United States even though it is one of the most preventable cancers. The American Cancer Society recommends that adults, starting at age 50, be screened for colorectal cancer using one of several evidence-based tests and testing schedules. Screening helps to detect the disease early when treatment is most likely to be successful and when, in some cases, the disease can be prevented by the detection and removal of precancerous polyps. Yet 23 million Americans between the ages of 50 and 74 are not being regularly screened, and nearly 140,000 will be diagnosed with colorectal cancer this year.

The National Colorectal Cancer Roundtable (NCCRT) is spearheading an initiative to substantially reduce colorectal cancer deaths by increasing the number of Americans who are regularly screened for colorectal cancer by 2018. Over 200,000 new cases could be averted by 2018 if we achieve the 80% goal. To date, more than 90 state, local, and national organizations have joined the effort. The NCCRT, co-founded by the American Cancer Society and the Centers for Disease Control and Prevention (CDC), is calling on all sectors of society to work together to achieve this goal.

A leadership role in the effort means you will:

1. Publicly commit to support the effort.
2. Involve key stakeholders in your community to help attain the goal.
3. Learn colorectal cancer screening rates for your city or town and develop specific goals to improve screening rates. Include current screening rates and the statewide goal to realistically set your targets by setting realistic screening rates.
4. Learn the colorectal cancer screening rates for your city or town and develop specific goals to improve screening rates. Include current screening rates and the specific goals to realize 80% in your city or town’s screening rates.
5. Publicly report the progress that is being made toward 80% during various public or health-related events, emphasizing and recognizing any accomplishments (no matter how small or large) with special emphasis in March—Colorectal Cancer Awareness Month.
6. Use the NCCRT’s Web Tools to conduct a needs assessment for colorectal cancer screening in your community.
7. Learn about the colorectal cancer screening rates for your city or town and develop goals to improve screening rates. Include current screening rates and specific goals to achieve 80% in your city or town’s screening rates.
8. Publicly commit to support the effort.

A leadership role in the effort means you will:

1. Publicly commit to support the effort.
2. Involve key stakeholders in your community to help attain the goal.
3. Learn colorectal cancer screening rates for your city or town and develop specific goals to improve screening rates. Include current screening rates and the statewide goal to realistically set your targets by setting realistic screening rates.
4. Learn the colorectal cancer screening rates for your city or town and develop specific goals to improve screening rates. Include current screening rates and the specific goals to realize 80% in your city or town’s screening rates.
5. Publicly report the progress that is being made toward 80% during various public or health-related events, emphasizing and recognizing any accomplishments (no matter how small or large) with special emphasis in March—Colorectal Cancer Awareness Month.
6. Use the NCCRT’s Web Tools to conduct a needs assessment for colorectal cancer screening in your community.
7. Learn about the colorectal cancer screening rates for your city or town and develop goals to improve screening rates. Include current screening rates and specific goals to achieve 80% in your city or town’s screening rates.
8. Publicly commit to support the effort.
Assessment of Medicaid Programs

- Commissioned Dr. Sara Wilensky with George Washington University to conduct this research.
- 50 state assessment of Medicaid programs and CRC screening activity conducted.
- The draft manuscript complete.
- We plan to submit the paper to Cancer.
Screening Navigation Guide

New guide on how to pay for screening navigation expected in the fall.
Process
We reached 500 pledges in October 2015 … and surpassed 1,000 pledges less than a year later in early July.
Ongoing Communication with Partners

We regularly share new resources, news, webinars, opportunities, etc. with our 80% by 2018 partners.

Events

Webinar - Colorectal cancer screening and the Patient-Centered Medical Home

(July 28, 2016; 3:00 pm Eastern to 4:00 pm Eastern.)

This webinar will address colorectal cancer screening in the Patient-Centered Medical Home. NCCRT Co-chair Dr. Robert Smith will review the article, Promoting cancer screening within the patient centered medical home, and NCCRT member Dr. Sue Lagarde will describe her practice’s use of colorectal cancer screening for patient-centered medical home recognition quality improvement efforts.
In the last year, we’ve hosted over a dozen webinars, 3 Twitter chats, and a Thunderclap.

nccrt.org/webinars/
New 80% by 2018 Blog

• We highlight successes, leaders, best practices and tools that are making an impact.

• Available via www.nccrt.org/80by2018blog.
2016 80% by 2018 National Achievement Awards

• Grand Prize: Coal Country Community Health Centers of North Dakota
  - Increased screening from 29% to 70% in three years

• Honorees:
  - Phoebe Putney Health System of Georgia
  - Tina Kiser Cancer Concern Coalition of Ohio
  - Premier Medical Associates of Pennsylvania
  - South Carolina Public Employee Benefit Authority

• 76 nominations received!
2016 80% by 2018 Webcast: The Road to Success

• Marked the two year anniversary of 80% by 2018 launch.
• Featured interviews with the five 80% by 2018 National Achievement Award honorees.
• Nearly 1,800 people viewed the webcast.
• 98% rated the content quality good or great.
NCCRT Meetings

Meetings:
• Sept. 24, 2015 – Hospital Strategy Meeting
• Sept. 25, 2015 – EHR Meeting
• April 25, 2016 – American Indian/Alaska Native Meeting
• Sept. 13, 2016 – Links of Care Lessons Learned
• Sept. 29, 2016 – Evaluation and Measurement of 80% by 2018
NCCRT Meetings and Publications

Publications:

• NCCRT’s Family History Task Group published a new article *Understanding the contribution of family history to colorectal cancer risk and its clinical implications: A state-of-the-science review* in the journal *Cancer*.

• Article on C5, *New York Citywide Colon Cancer Control Coalition: A Public Health Effort to Increase Colon Cancer Screening and Address Health Disparities* published in the journal *Cancer*. 
New State Roundtable Guide Coming Soon

The guide will feature the experiences of model programs in California, Delaware, Kentucky, Minnesota and South Carolina.
Poster Maps 80% by 2018 Progress by State

Presented by Ann G. Zauber, PhD, at the Digestive Week Conference.

Compared the number needed to screen to reach 80% by 2018 in each state with the number of pledges received in each state.

nccrt.org/about/80-by-2018-progress-by-state/
80% by 2018 Hall of Fame will launch soon and recognize organizations that achieved 80% screening rates.

<table>
<thead>
<tr>
<th>Community Health Centers*</th>
<th>Commercial Health Plans**</th>
<th>Medicare Advantage Plans**</th>
<th>Medical Practices, Health Systems, etc.***</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bee Busy Wellness Center (TX)</td>
<td>Anthem Health Plans of Maine, Inc./Anthem Blue Cross and Blue Shield (BCBS) - ME</td>
<td>Blue Cross and Blue Shield of Massachusetts, Inc.</td>
<td>Guernsey County (OH)</td>
</tr>
</tbody>
</table>
New 80% by 2018 Resource Packet
Available at www.nccrt.org/80by2018
We will complete our second annual 80% by 2018 partner survey this fall.
It’s been an incredible 2.5 years. But it’s going to take even greater combined effort to reach 80% by 2018.
Thank You