Thank you for joining!
The session will begin shortly.
Screening at 45: Implementing the USPSTF Recommendation and Reaching the Newly Eligible for Colorectal Cancer Screening

Monday, November 15, 2:10 PM
YOCA: Young Onset Colorectal Adenomas
Parth Trivedi, Aditi Mahopatra, Melissa Morris, Shannon Thorne, Amanda Ward, Sandra Smith, Heather Hampel, Lina Jandorf, Paul Schroy, John Popp, Steven Itzkowitz

- AMSURG: data from 123 ASCs (ambulatory surgery centers) across 29 states that use GI Quality Improvement Consortium (GIQuIC) standards
- Timeframe: 2014 - 2021
- 562,559 high-quality colonoscopies.

GIQuIC-reporting AMSURG ASCs:
### YOCA: Young Onset Colorectal Adenomas

#### Any Neoplasia

| Age Group | N | %
|-----------|---|---
| 18 - 29   | 2,952 | 7.94%
| 30 - 34   | 3,691 | 15.21%
| 35 - 39   | 6,799 | 20.38%
| 40 - 44   | 13,606 | 26.59%
| 45 - 49   | 25,688 | 32.14%
| 50 - 54   | 126,986 | 37.72%

#### Advanced Premalignant Lesions

| Age Group | N | %
|-----------|---|---
| 18 - 29   | 446 | 1.20%
| 30 - 34   | 694 | 2.86%
| 35 - 39   | 1,439 | 4.31%
| 40 - 44   | 2,947 | 5.76%
| 45 - 49   | 5,992 | 7.50%
| 50 - 54   | 31,922 | 9.48%

#### Any Neoplasia by Family History of CRC

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<tr>
<th>Age Group</th>
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<tbody>
<tr>
<td>18 - 29</td>
<td>7.83%</td>
<td>11.49%</td>
<td>14.78%</td>
<td>19.81%</td>
<td>26.92%</td>
<td>26.00%</td>
<td>31.54%</td>
<td>31.74%</td>
<td>35.99%</td>
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<td>30 - 34</td>
<td>14.78%</td>
<td>21.64%</td>
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<tbody>
<tr>
<td>18 - 29</td>
<td>1.19%</td>
<td>1.52%</td>
<td>2.71%</td>
<td>5.10%</td>
<td>4.15%</td>
<td>6.21%</td>
<td>5.45%</td>
<td>8.36%</td>
<td>7.23%</td>
<td>10.03%</td>
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<td>30 - 34</td>
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</table>

*N = total number of cases.*
Screening at 45: Implementing the USPSTF Recommendation

Steven Itzkowitz  
MD, FACP, FACG, AGAF  
*Icahn School of Medicine at Mount Sinai*

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JD  
*American Cancer Society  
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Stacey Fedewa  
PhD, MPH  
*American Cancer Society*
Coverage Implications for Revised USPSTF Colorectal Cancer Guidelines

Anna Schwamlein Howard
Policy Principal
ACS CAN

November 15, 2021
Screening for Colorectal Cancer
US Preventive Services Task Force Recommendation Statement

US Preventive Services Task Force

| Adults aged 50 to 75 years | The USPSTF recommends screening for colorectal cancer in all adults aged 50 to 75 years. | A |
| Adults aged 45 to 49 years | The USPSTF recommends screening for colorectal cancer in adults aged 45 to 49 years. | B |
| Adults aged 76 to 85 years | The USPSTF recommends that clinicians selectively offer screening for colorectal cancer in adults aged 76 to 85 years. Evidence indicates that the net benefit of screening all persons in this age group is small. In determining whether this service is appropriate in individual cases, patients and clinicians should consider the patient’s overall health, prior screening history, and preferences. | C |

USPSTF recommendation issued May 18, 2021
Medicare

• Traditional Medicare

<table>
<thead>
<tr>
<th>Screening Method</th>
<th>Frequency</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multi-target stool DNA test</td>
<td>Once every 3 yrs</td>
<td>50-85</td>
</tr>
<tr>
<td>Screening colonoscopy</td>
<td>Once every 10 yrs</td>
<td>No min. age requirement</td>
</tr>
<tr>
<td>Screening fecal occult blood test</td>
<td>Once every 12 months</td>
<td>50+</td>
</tr>
<tr>
<td>Flexible sigmoidoscopies</td>
<td>Once every 4 yrs</td>
<td>50+</td>
</tr>
</tbody>
</table>

• Medicare Advantage Plans

Can provide coverage beyond traditional Medicare
Medicaid

- Expansion population
  USPSTF A/B recommended services provided at no cost-sharing

- Non-expansion population
  Not required
  Most states choose to cover
Commercial Market

- ACA-compliant, non-grandfathered health plans must provide coverage for USPSTF A/B recommended services at no cost-sharing

Issuers do not have to change coverage mid-year

Plans must comply no later than 2023

Grandfathered health plans are not required to comply, but may choose to do so
Sources of Health Insurance Coverage

*Estimates for type of coverage can be mutually exclusive, people can be covered by more than one type of health insurance during the year.

What’s next?

• Some states have coverage mandates
  Variation on plan type and guideline body
  State mandate defrayal requirement

• Coverage for follow-up colonoscopies
Thank you!

anna.howard@cancer.org
Advocacy progress: Op45
Our goal

We want payers to adopt USPSTF’s new guideline immediately.
Why?

• We can’t wait until 2023.
• There are 20 million people aged 45-49.
• They have largest incidence rate of young-onset population.
• Our data suggested far less than 50% were covered.
Tactics

• Grassroots call campaign
• Executive meetings
• Some tactics for you, stay tuned…
Where we are now
Largest payers mostly cover!

<table>
<thead>
<tr>
<th>Payer</th>
<th>Market share</th>
<th>Cover?</th>
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</thead>
<tbody>
<tr>
<td>UnitedHealth Group</td>
<td>14%</td>
<td>Yes</td>
</tr>
<tr>
<td>Kaiser Foundation</td>
<td>14%</td>
<td>Likely</td>
</tr>
<tr>
<td>Anthem</td>
<td>6%</td>
<td>Yes</td>
</tr>
<tr>
<td>Centene Corp</td>
<td>6%</td>
<td>Yes</td>
</tr>
<tr>
<td>Humana</td>
<td>6%</td>
<td>Yes</td>
</tr>
<tr>
<td>CVS Health (Aetna is subsidiary)</td>
<td>6%</td>
<td>Likely</td>
</tr>
<tr>
<td>HCSC</td>
<td>3%</td>
<td>Likely</td>
</tr>
<tr>
<td>Cigna Health</td>
<td>3%</td>
<td>Yes</td>
</tr>
<tr>
<td>Independence Health Group</td>
<td>2%</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Likely not covering

- Care Oregon
- Health Net of California
- Kaiser Permanente Thrive
- Molina HealthCare, California
- Oscar Health
- Sharp Health Plan, CA
Calls to action

Stay tuned to NCCRT newsletter for Op45 CTA.

Email me with questions!
Alexandra Miller, Senior Director of Community Engagement
Amiller@ccalliance.org
CRC Screening Utilization Among People Aged 45-49 years: Where are we now?

Stacey A Fedewa, PhD
NCCRT Annual Meeting
November 2021
Characteristics of people 45-49 years

- Approx. 20 million people
- 52% female
- 38% are non-White (17% Hispanic, 12% Black, 7% Asian)
- 24% not born in the US
- 68% have seen a physician in the past year
- 14% currently smoke
- 72% are classified as overweight or obese

Source: US Census Data and National Health Interview Survey, 2018
Health Insurance among People Aged 45-49 years*

- **Uninsured**: 13%
- **Private**: 73%
- **Medicaid or other public**: 9%
- **Other (eg:...)**

*As of 2018*
What do we know about screening among people 45-49 years?

• In 2018 NHIS, 21% of people 45-49 years reported “being up to date”

• Asian (17%) and Hispanic (12%) individuals
• Uninsured (10%)
• No PCP visit in the past year (9%)

• Black individuals (28%)
• PCP visit in the past year (26%)

Source: National Health Interview Survey, 2018
Reasons and Cost for Colonoscopy among People 45-49 vs 50+ years

• Among respondents in 2010, 2013, 2015 and mid-2018 NHIS receiving a colonoscopy

• **Routine Reason**: 44% of people 45-49 years vs **82%** of people 50+ years

• **Some cost**: 46% of people 45-49 years vs **31%** of people 50+ years

Recent Colorectal Screening (Past Year) among Adults 45-49 years, NHIS 2015 and 2018

Stool-testing is modestly increasing in adults 50-75 years

Thank you!
Reaching the Young Eligible

Heather Hampel, MS, CGC

City of Hope National Cancer Center
Associate Director, Division of Cancer Genomics
NCCRT Family History & Early-Age Onset CRC Strategic Priority Team Co-chair
Market Research Goals & Intentions

• NCCRT has developed several targeted communication guides in the last several years.

• In April, NCCRT began discussing the development of a new messaging guidebook for those nearing the age of 45 or 50 and those newly eligible for screening.

• This guide will include market research on those aged 20 to 49-years-old and serve as a supplement to the 80% in Every Community 2019 Messaging Guidebook.
Through this project we aim to better understand:

• General awareness around family history and knowledge of when to get screened among 20–49-year-olds.

• Perceptions about CRC and the likelihood of getting screened on-time.

• Recommendations for reaching younger audiences with screening messaging:
  • What do they want/need to know?
  • When should these messages be delivered?
  • Who should deliver the information?

• Effective messaging that best resonates with this audience.
Working with NCCRT’s Advisory Group

• Built a robust questionnaire for market research, analyze the results, and use the key findings to identify top tested messages for 20- to 49-year-olds.

• Use information gained to build a messaging guide to inform future initiatives and strategies to increase CRC screening rates.

_NCCRT Advisory Group:

• Provides subject matter expertise
• Reviews materials and provide feedback

Michelle Aubertine with KS&R will be doing a deeper dive into this research during Concurrent Session 2 on Tuesday, November 16th.
Questions & Answers