

2022 NCCRT Annual Meeting

WHAT DO THE DATA TELL US?



Purpose of This Session

Understand the current data and trends in four key data sets:

- BRFSS - Behavioral Risk Factor Surveillance System
- NHIS - National Health Interview Survey
- HEDIS - Healthcare Effectiveness Data and Information Set
- UDS - Uniform Data System

What Do the Data Tell Us?



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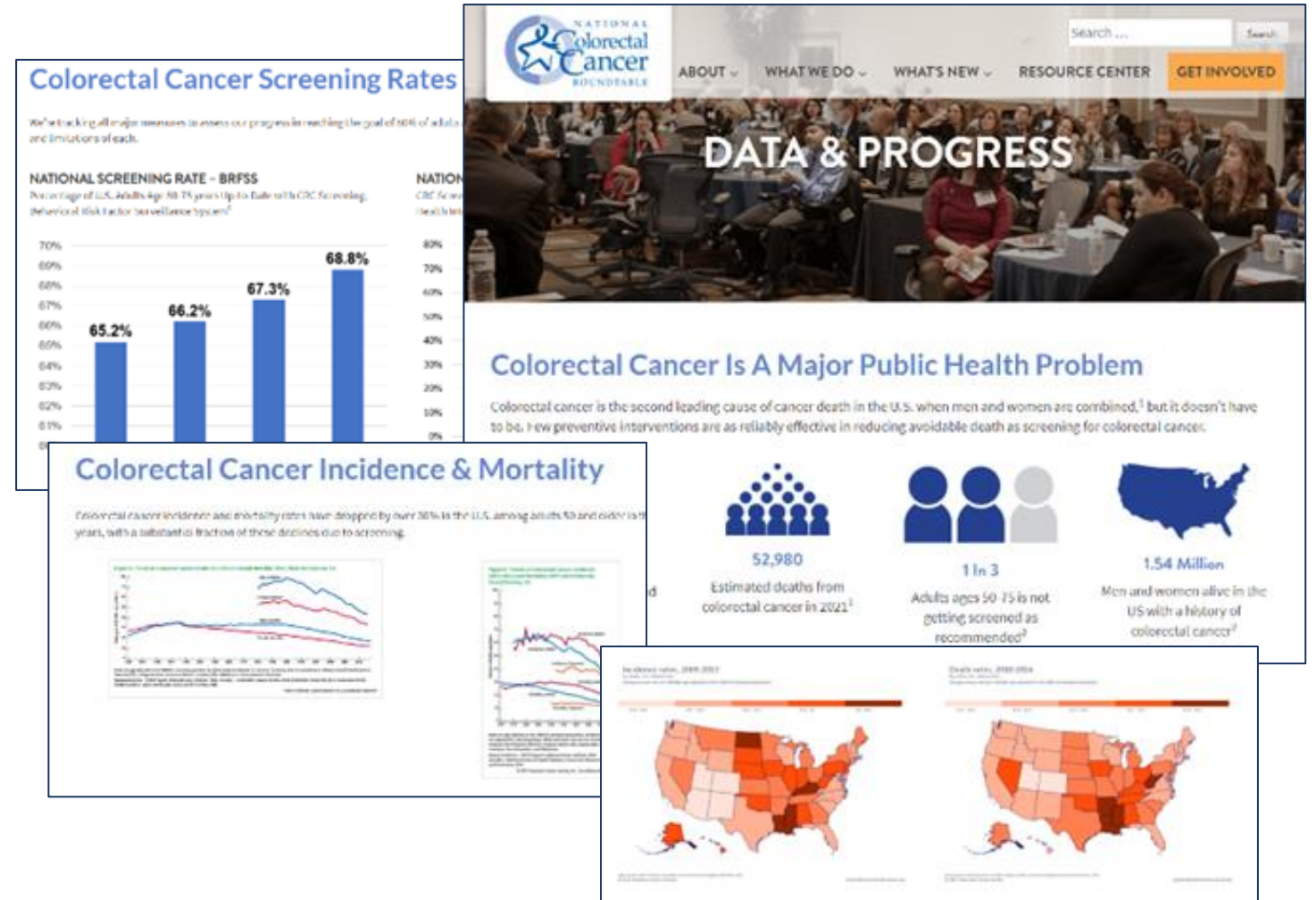
Amelia Khalil

Team Lead

*Quality Recognition and
Health Promotion, HRSA*

The NCCRT Data & Progress Web Page

The NCCRT Data & Progress webpage provides up-to-date statistics on colorectal cancer screening, incidence, mortality, and geographic distribution information.





Behavioral Risk Factor Surveillance System

Wednesday, November 16, 2:00 PM



Behavioral Risk Factor Surveillance System (BRFSS) 2020 Data Update

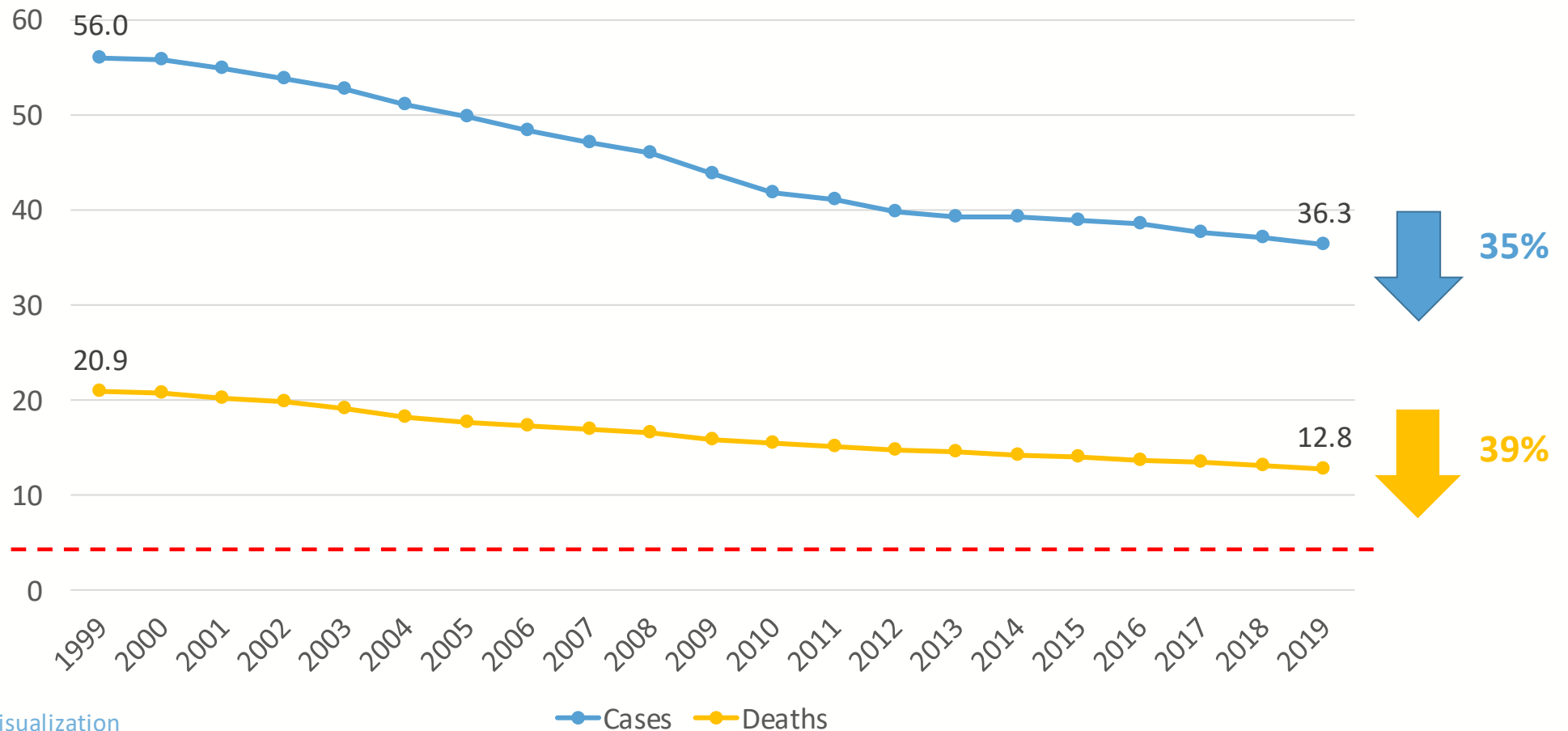
Lisa Richardson, MD, MPH
Director, CDC Division of Cancer Prevention and Control

NCCRT Annual Meeting
November 16, 2022



Colorectal Cancer Deaths and Cases

Colorectal Cancer Cases and Deaths, All Ages, All Races/Ethnicities, Both Sexes, 1999-2019



Source: [CDC Data visualization](#)

2020 Behavioral Risk Factor Surveillance System (BRFSS) Colorectal Cancer Screening Overview

7 in 10 U.S. Adults
Ages 50-75



Up to Date with
Colorectal Cancer Screening

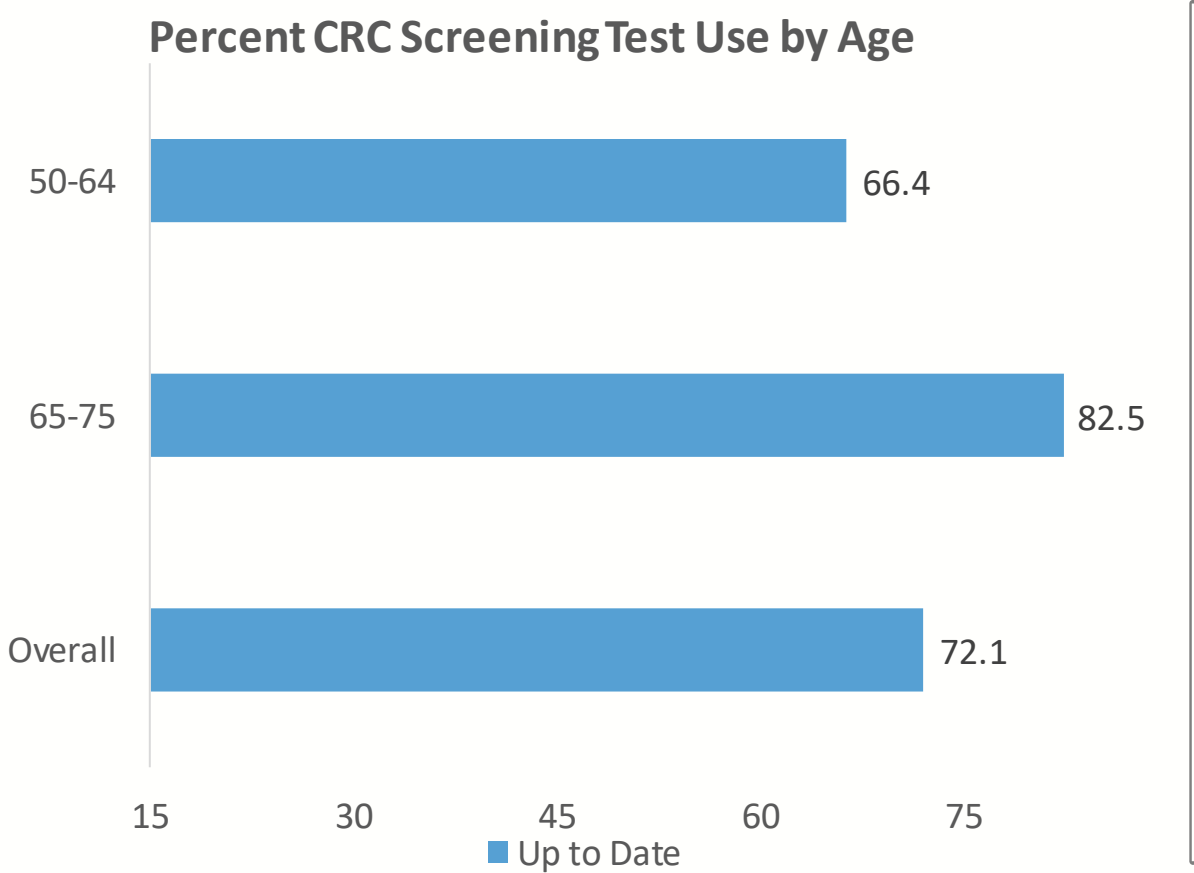
- Includes **FIT-DNA test** and **computed tomography (CT) colonography** for first time
- **64** million screened
- **71.6%** - Up to date with colorectal cancer screening (all test types)*
- **19.9%** Never Screened
- **69.7%** Up to date with colorectal cancer screening by previous year's definition**

[Source: Use of Colorectal Cancer Screening Tests | CDC](#)

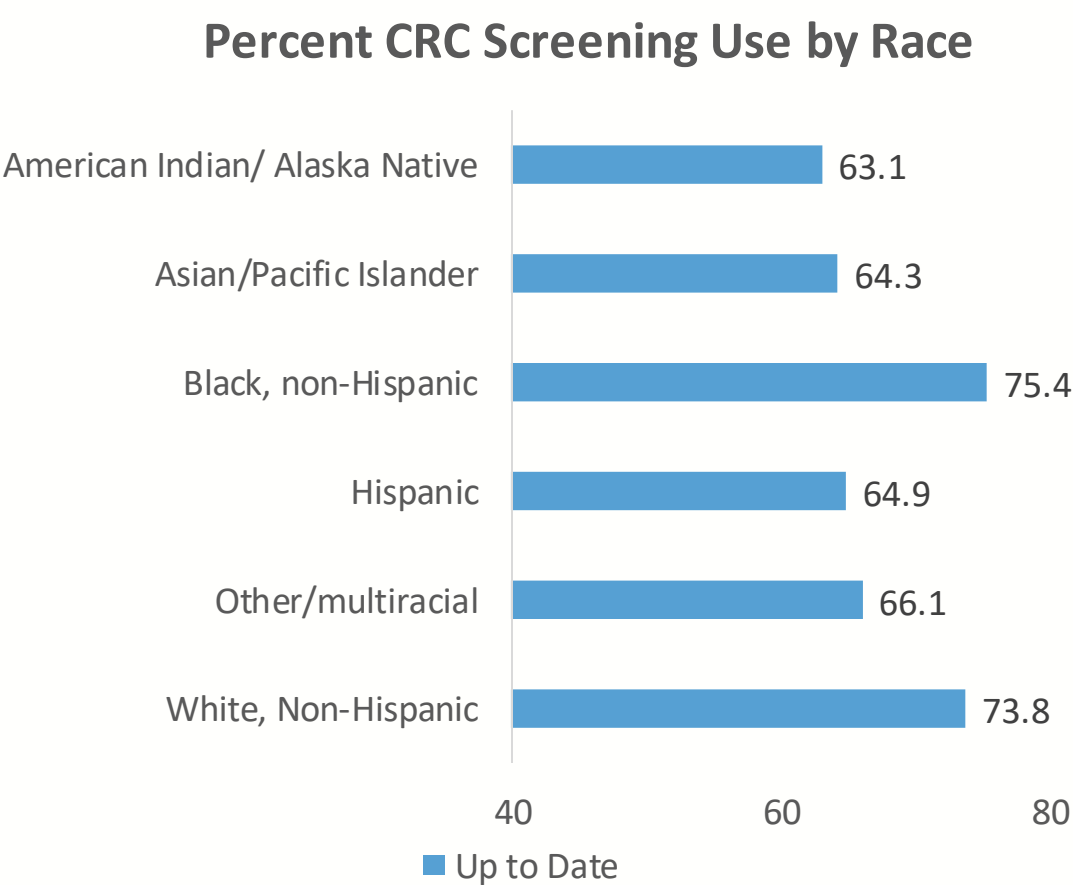
* including FIT-DNA, CT (virtual) colonography

** the percentage of adults aged 50 to 75 who were up-to-date with fecal immunochemical test (FIT), sigmoidoscopy, and colonoscopy in 2020

Reported Colorectal Cancer (CRC) Screening Test Use By Age and Race*

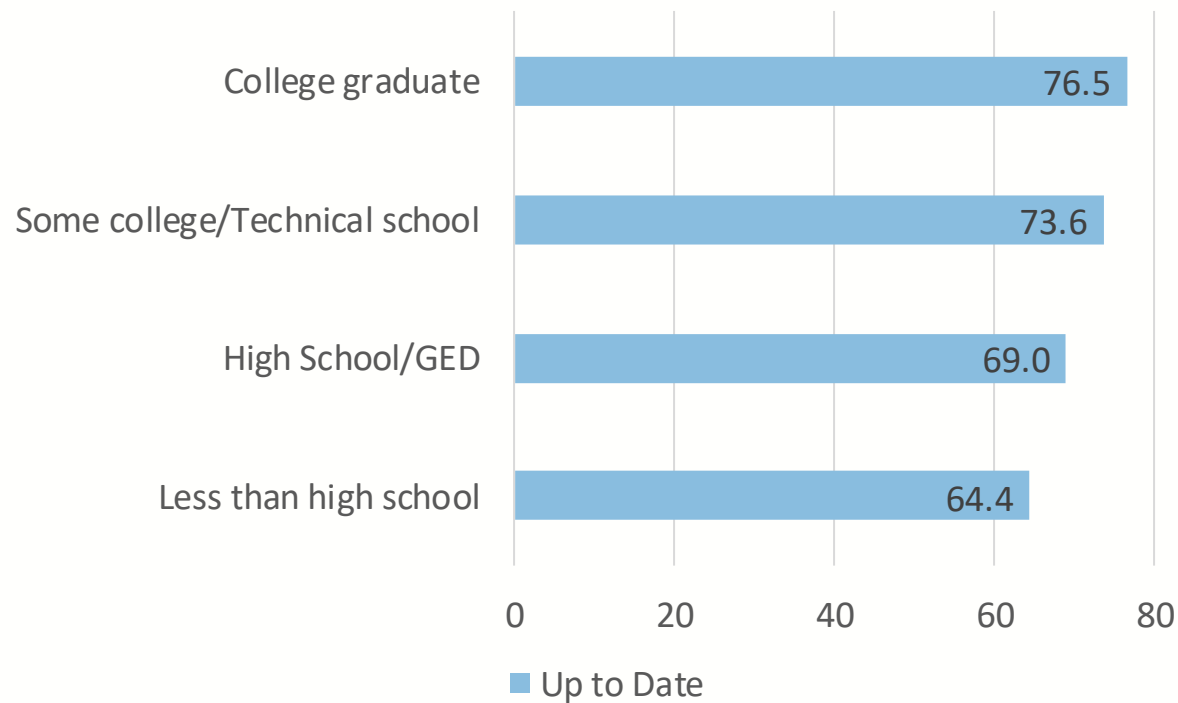


* Age standardized

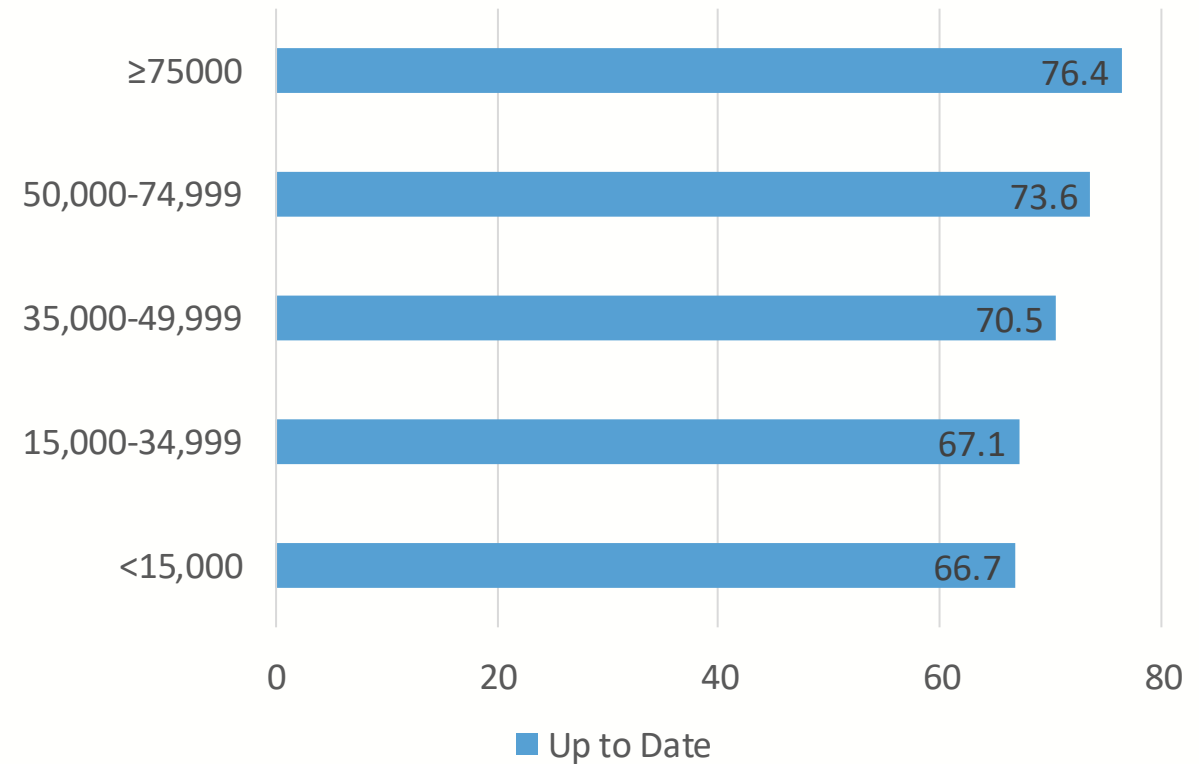


Reported Colorectal Cancer (CRC) Screening Test Use By Education and Income*

Percent of CRC Screening Test Use by Education



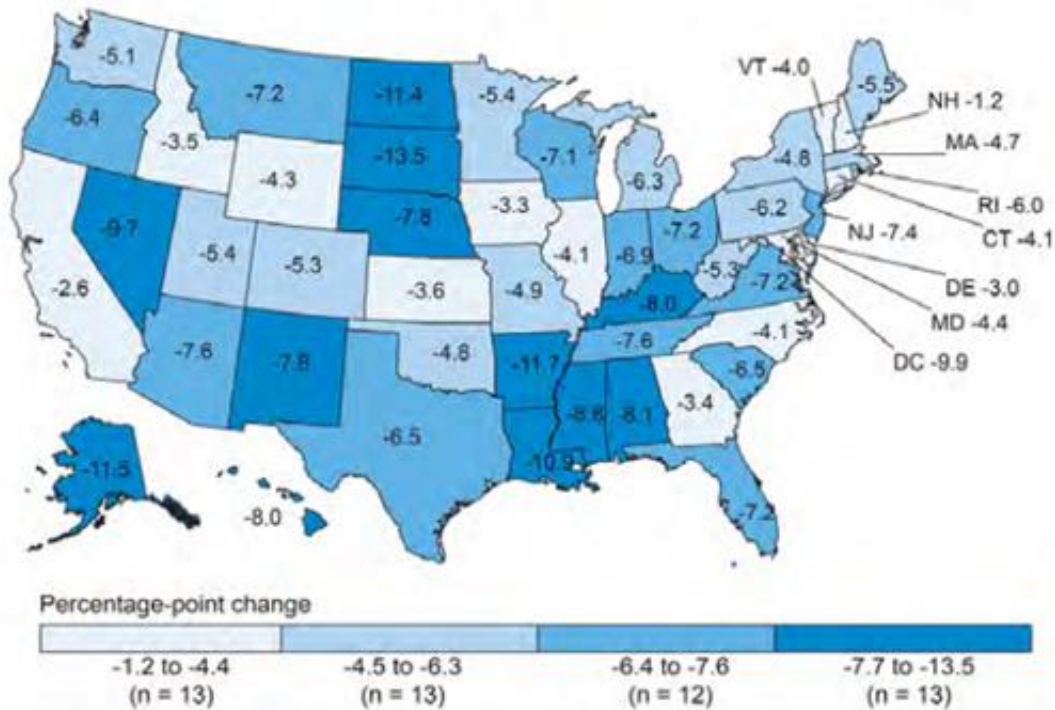
Percent CRC Test Use by Income



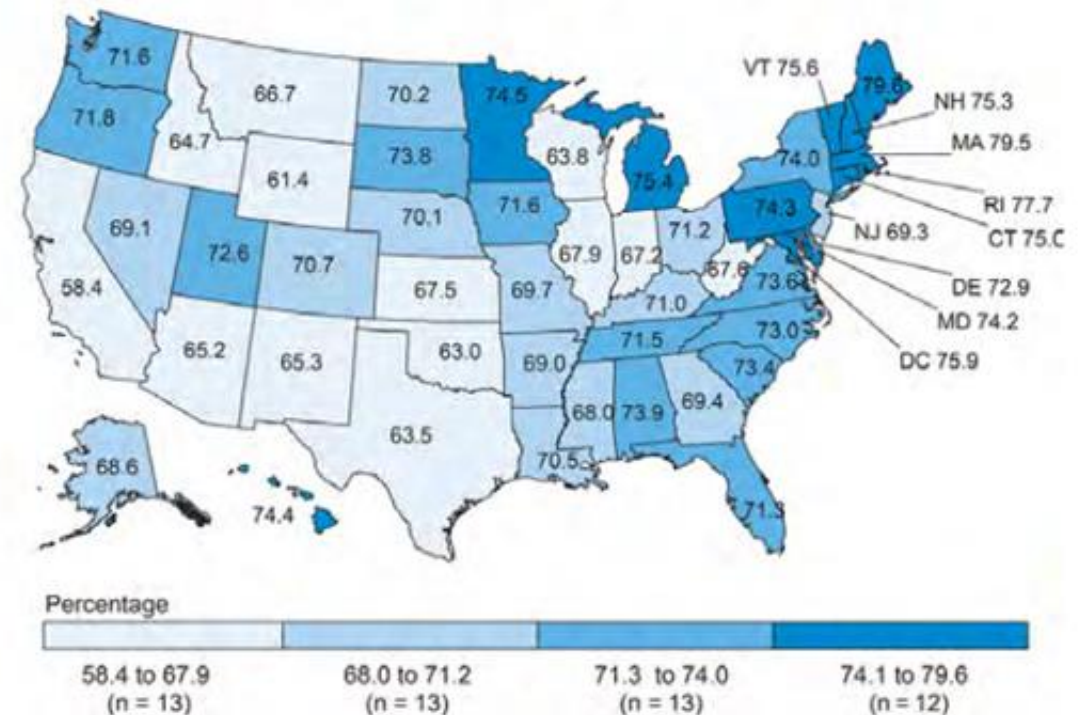
* Age standardized

Adults Never Screened for Colorectal Cancer

A Change in percentage of respondents aged 50–75 years who reported they were never screened for colorectal cancer, 2012 to 2020

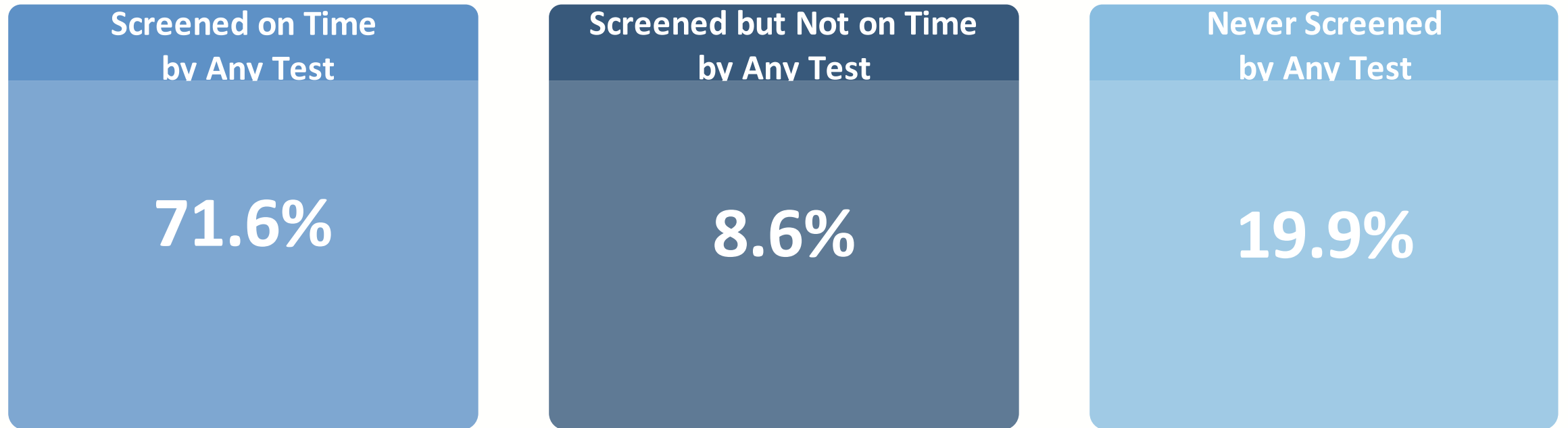


[B] Percentage of respondents aged 50–75 years who reported being up to date with colorectal cancer screening, 2020



Source: Richardson LC, King JB, Thomas CC, Richards TB, Dowling NF, Coleman King S. Adults Who Have Never Been Screened for Colorectal Cancer, Behavioral Risk Factor Surveillance System, 2012 and 2020. *Prev Chronic Dis* 2022;19:220001. DOI: <https://doi.org/10.5888/pcd19.220001>.

Colorectal Cancer Screening Behaviors



Demographic Characteristics for Never Screened by Any Test

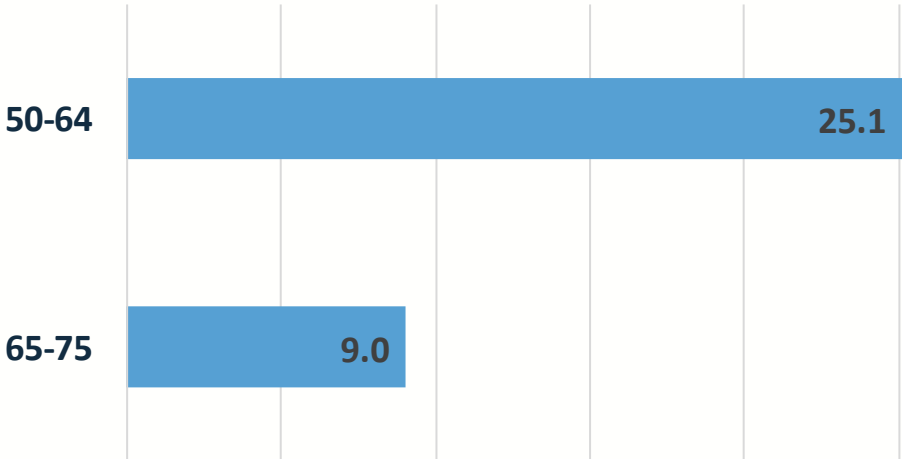


18%

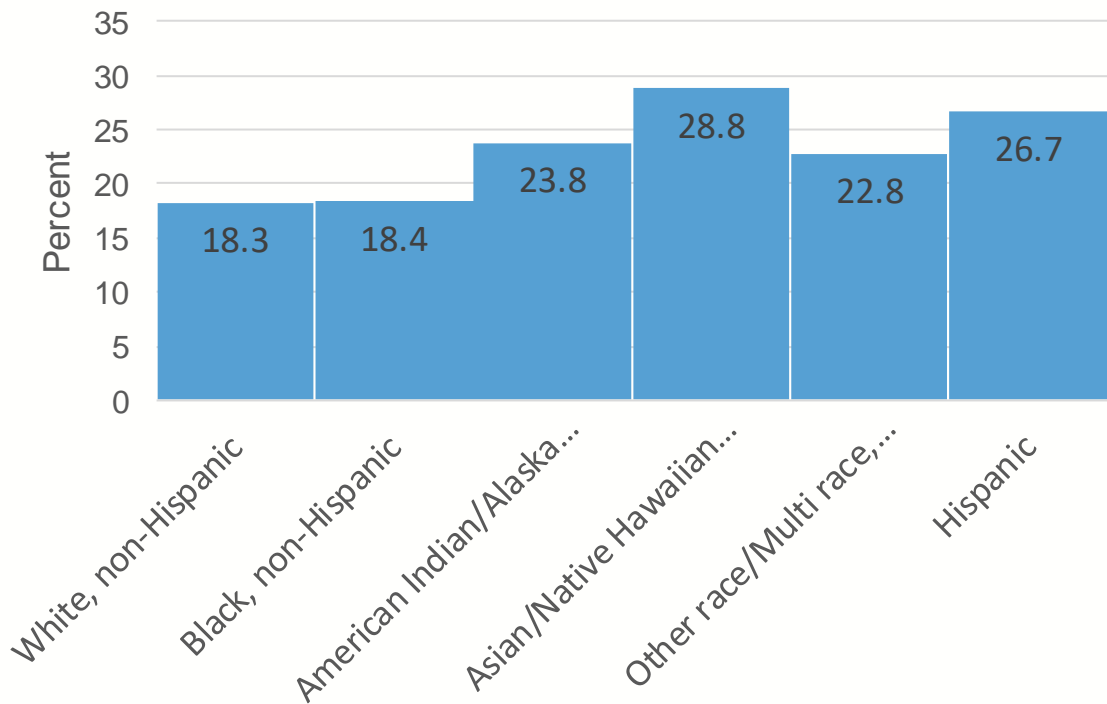


22%

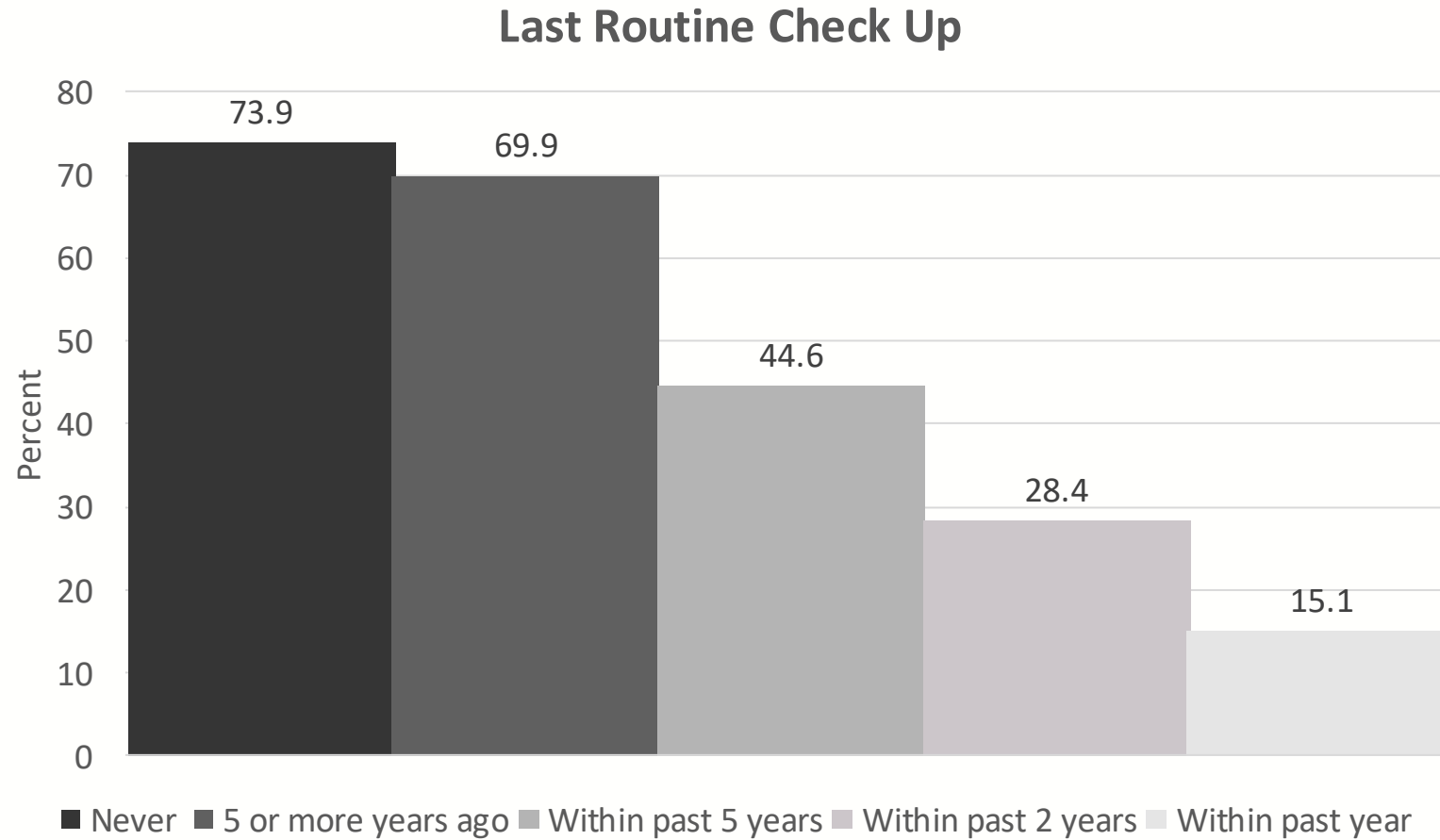
Percentage Never Screened by Age



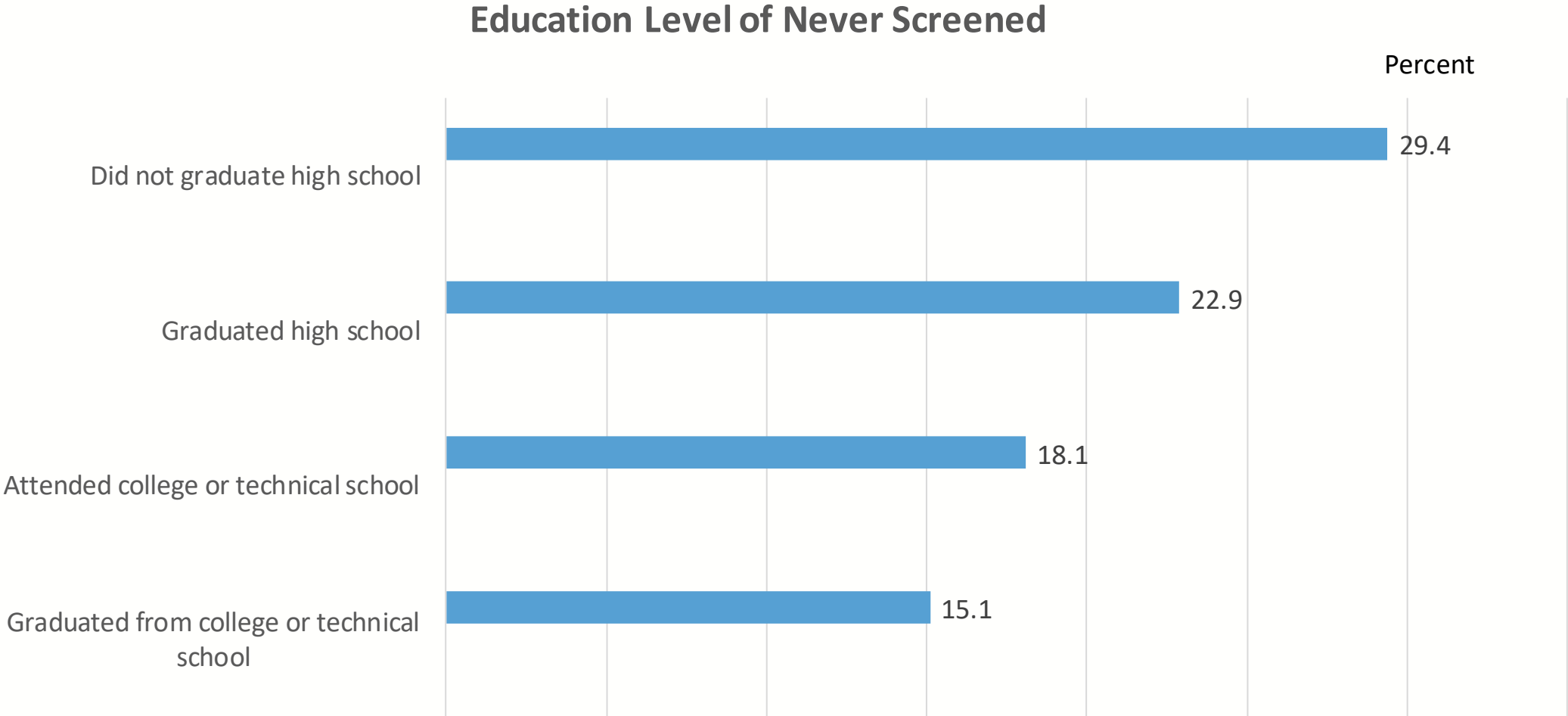
Never Screened by Race



Never Screened Health History

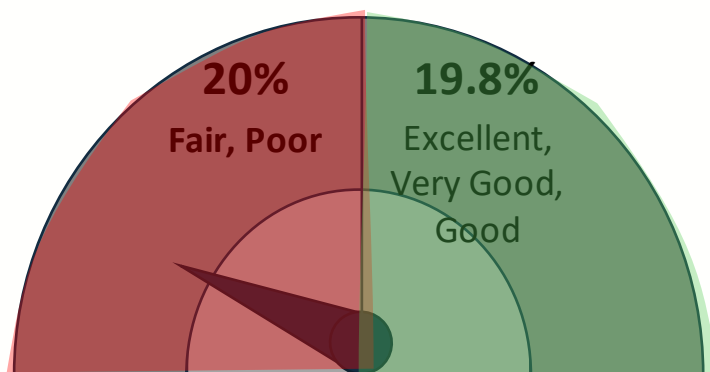


Never Screened Education Level

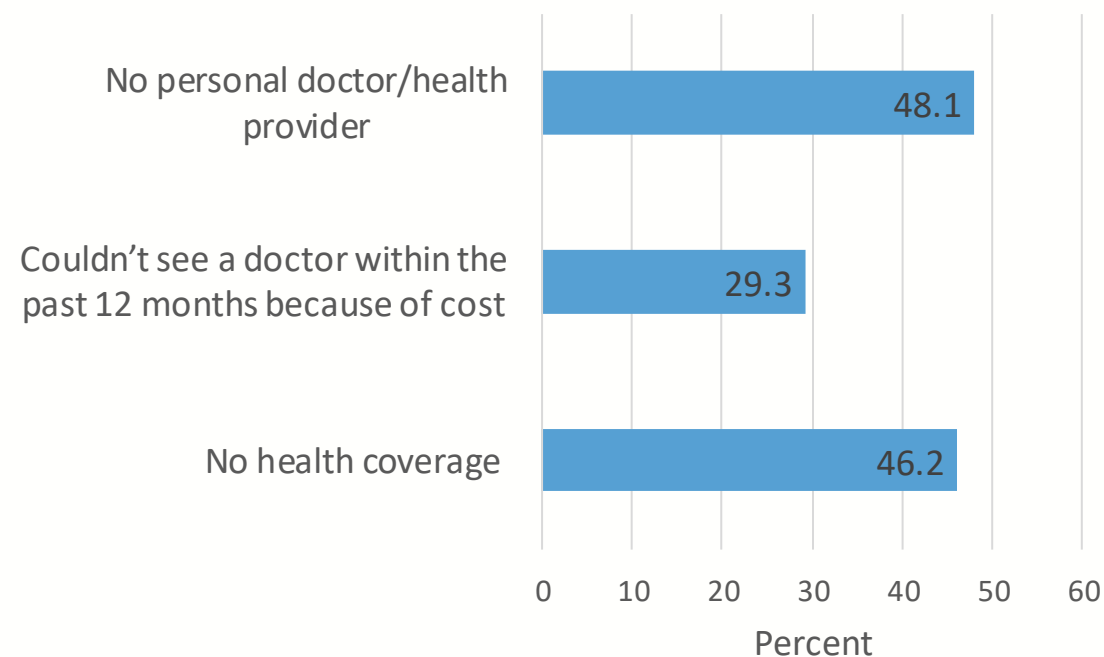


Never Screened Perceived Health Status and Barriers

Self Reported General Health



Perceived Health Barriers





Thank you!

Go to the official federal source of cancer prevention information:
www.cdc.gov/cancer



Division of Cancer Prevention and Control

Reliable. Trusted. Scientific.

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



Thank You!



National Health Interview Survey

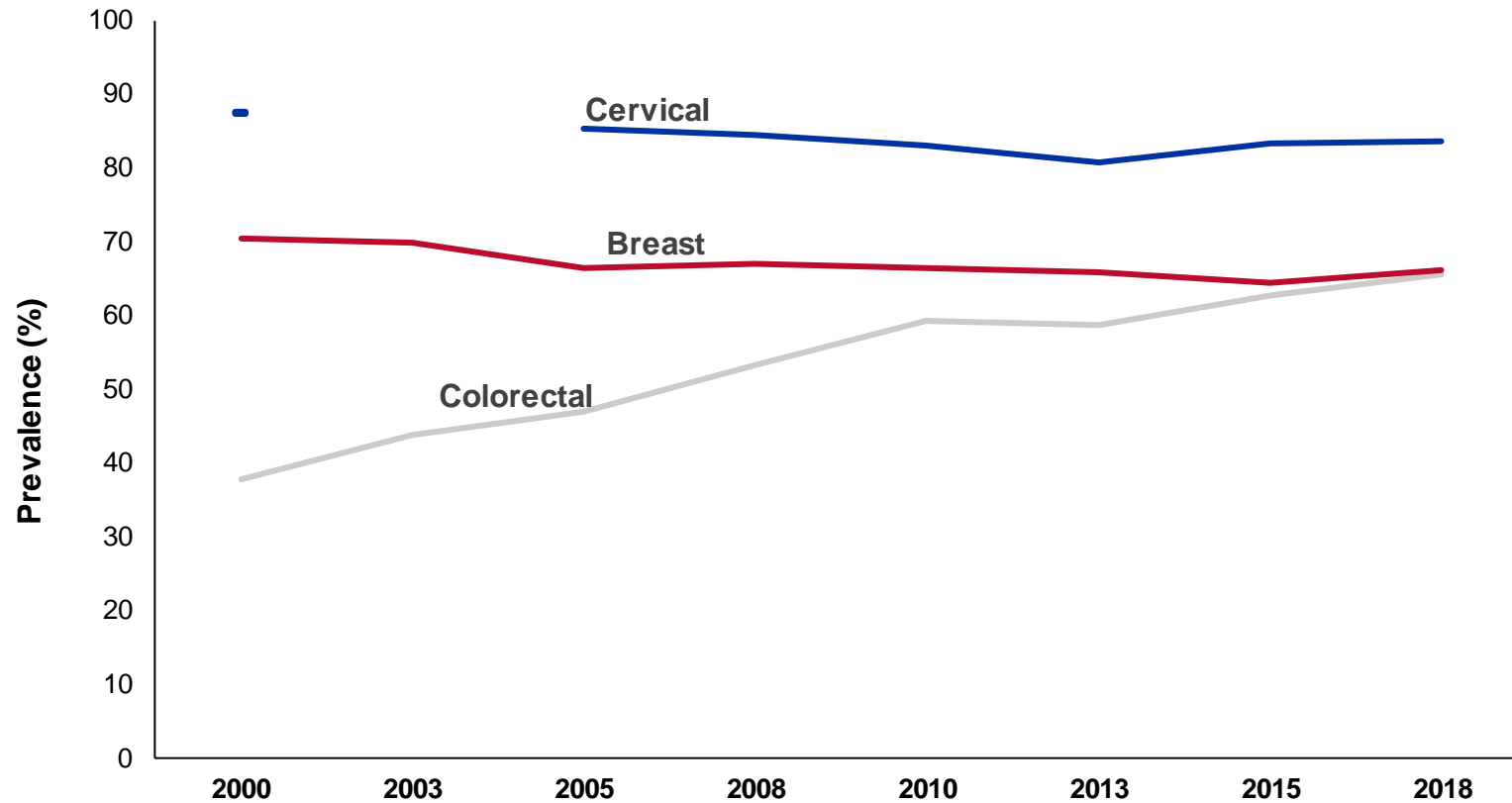
Wednesday, November 16, 2:00 PM

What Do the Data Tell Us About CRC Screening? The National Health Interview Survey.

National Colorectal Cancer Roundtable
November 2022
Jessica Star, MA, MPH
Surveillance and Health Equity Sciences
American Cancer Society



Trends in Breast*, Cervical†, and Colorectal‡ Cancer Screening (%), US, 2000-2018

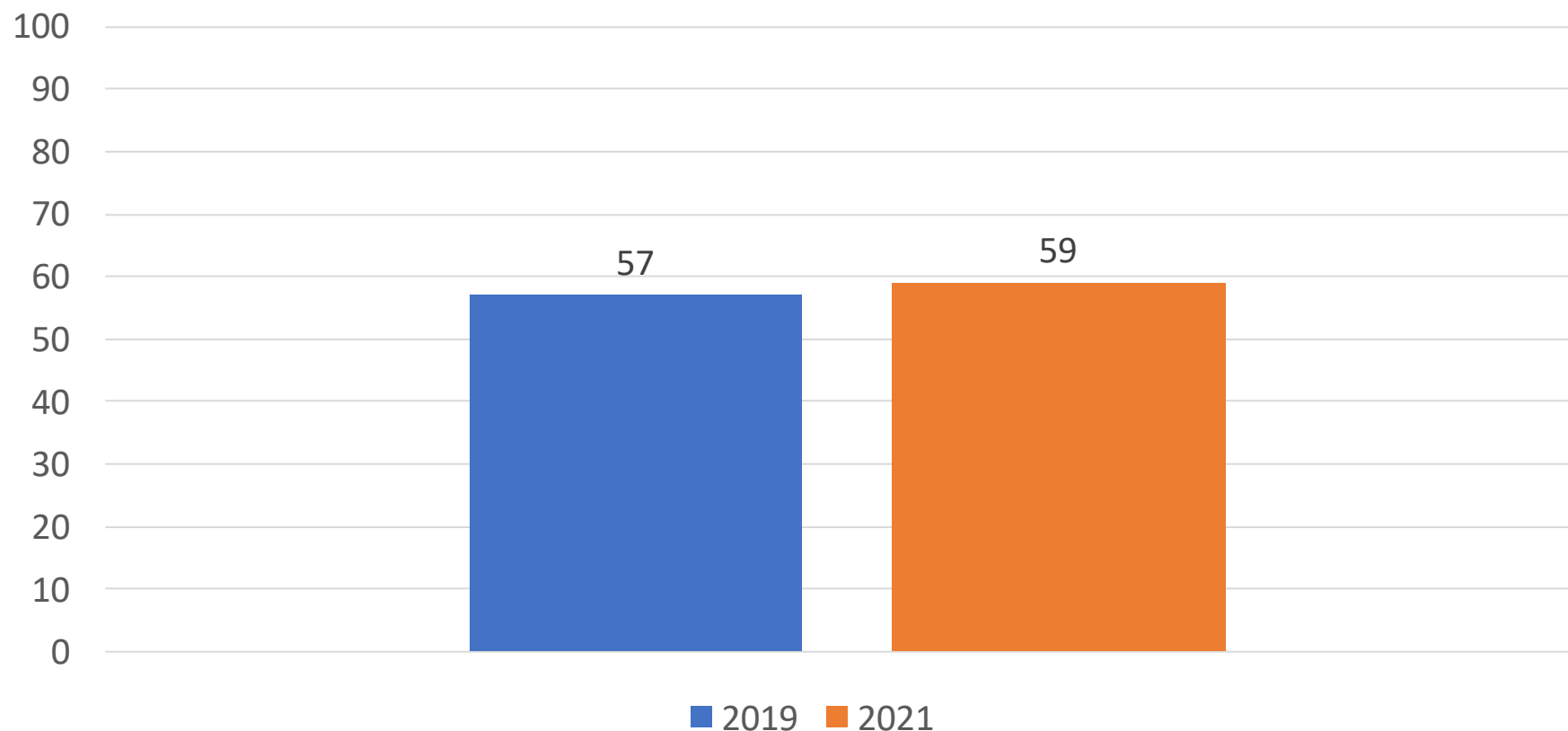


American Cancer Society. *Cancer Prevention & Early Detection Facts & Figures Tables and Figures 2021-2022*. Atlanta: American Cancer Society; 2021-2022.

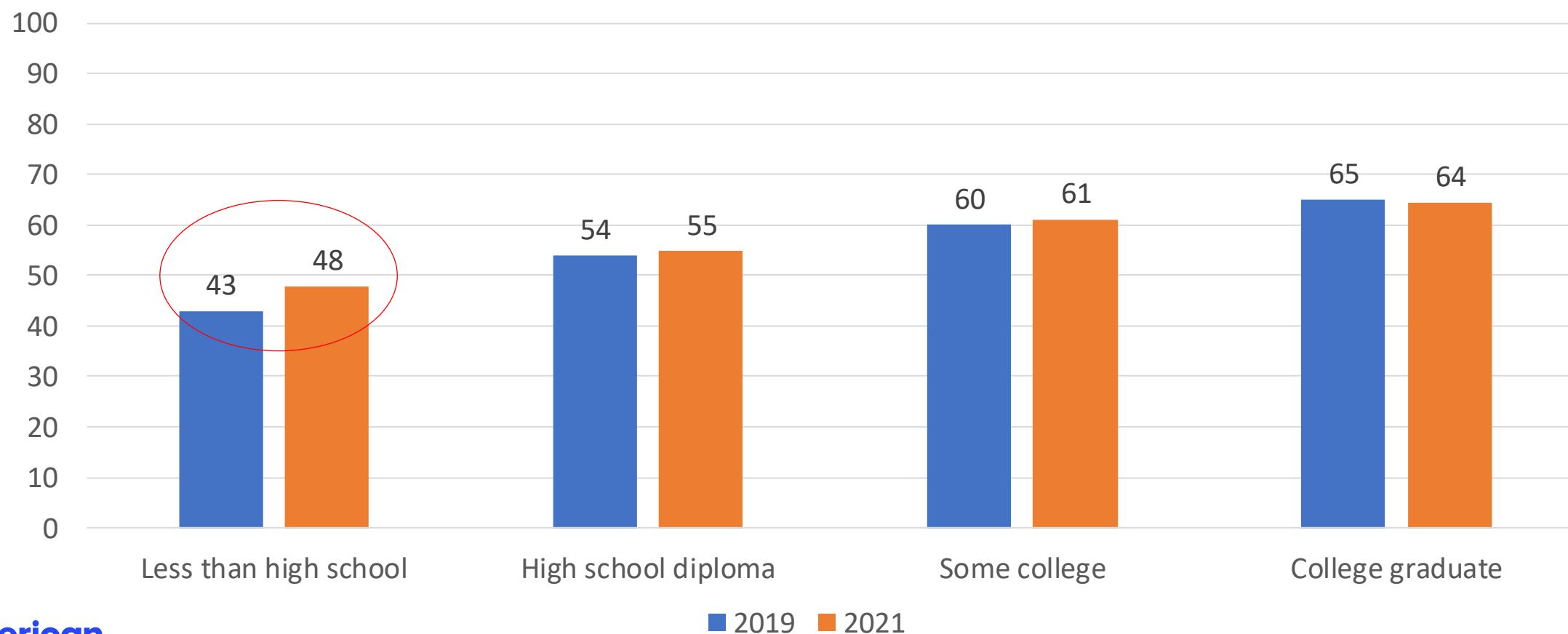
National Health Interview Survey (Historical)

- In person, household survey among non-institutionalized adults
- Self-reported CRC screening data
 - Colonoscopy
 - Sigmoidoscopy
 - FIT/gFOBT (hereafter FIT)
 - CT Colonography (added in 2010)
 - sDNA/Cologuard (added in 2018)
- 2019: Change in survey design, CRC screening questions, and rotation
- 2021: CRC screening data are collected, mix of in-person/ telephone

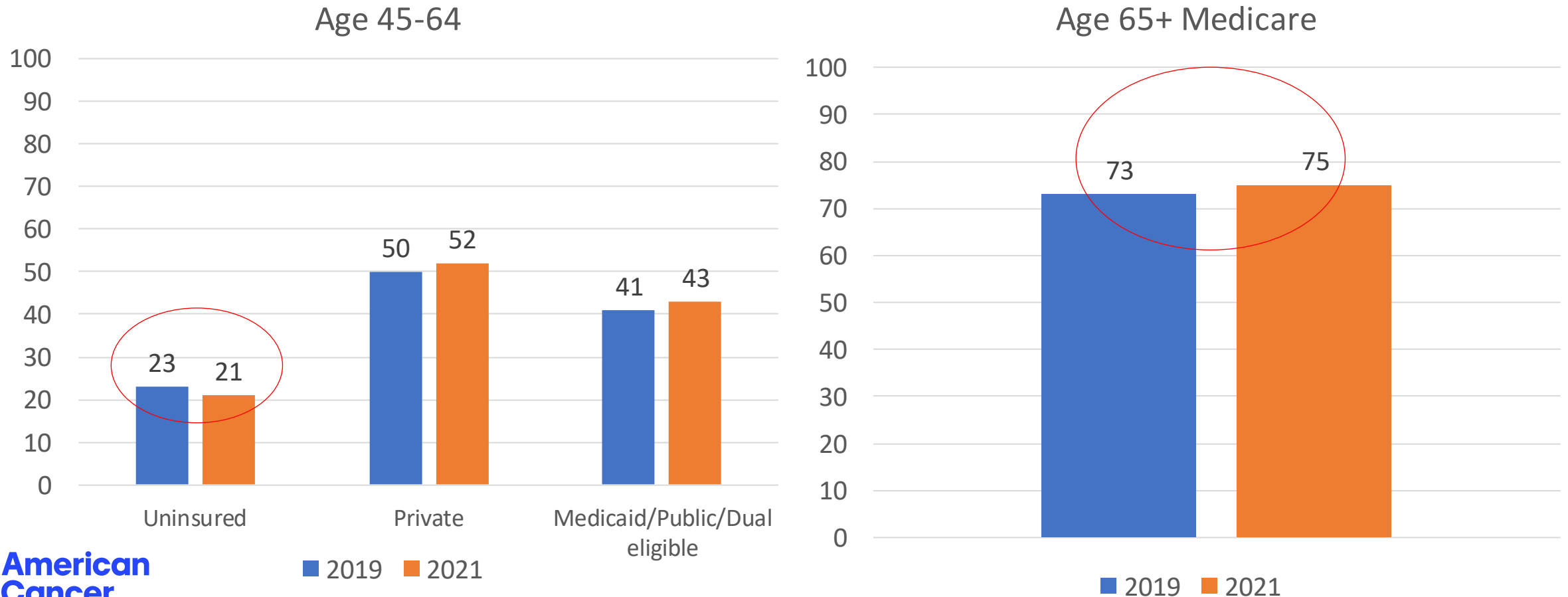
Changes in Overall Age Adjusted UTD CRC Screening Prevalence between 2019 and 2021–Aged 45+



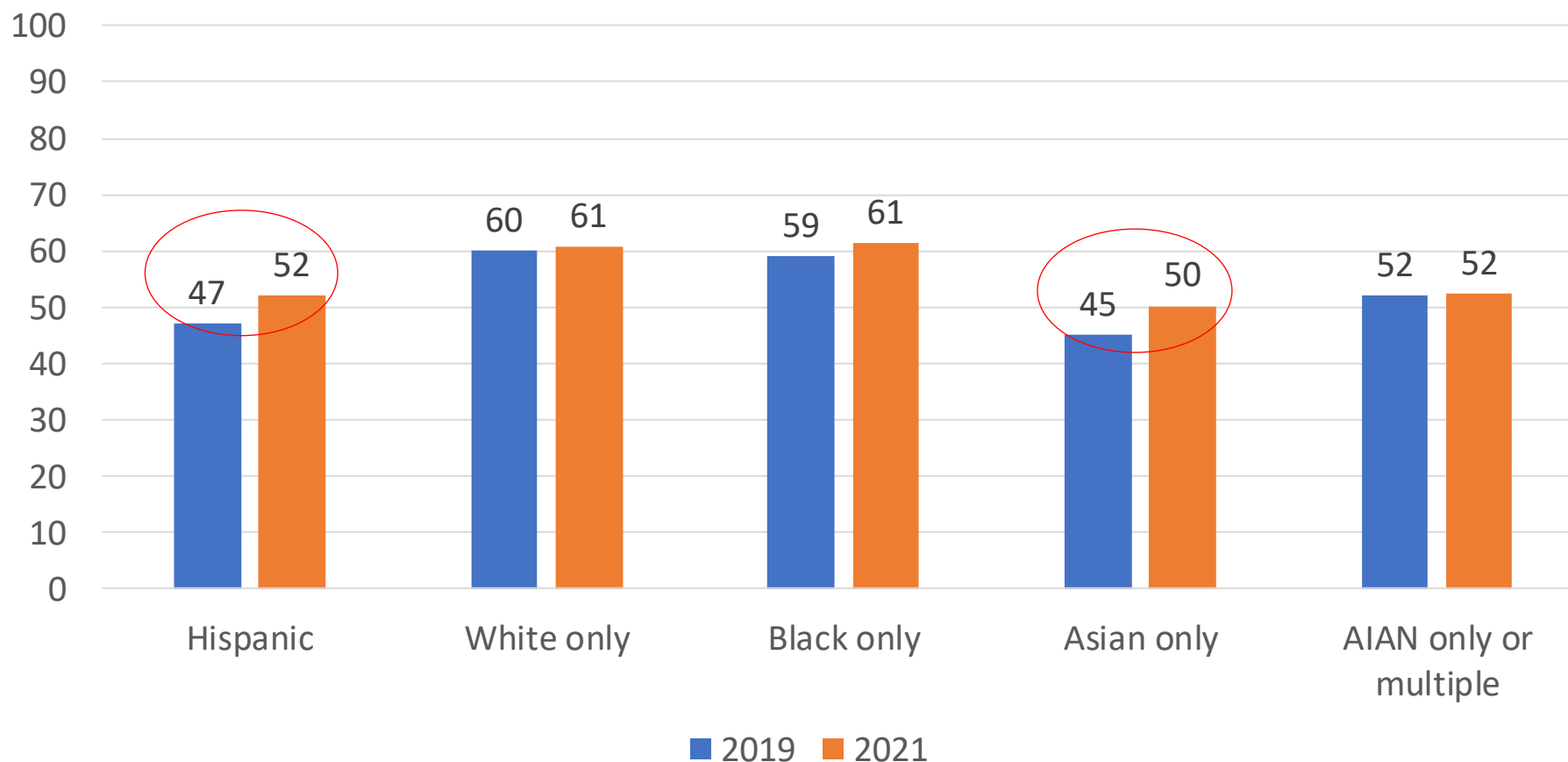
Changes in Age Adjusted UTD CRC Screening Prevalence between 2019 and 2021 by Education – Aged 45+



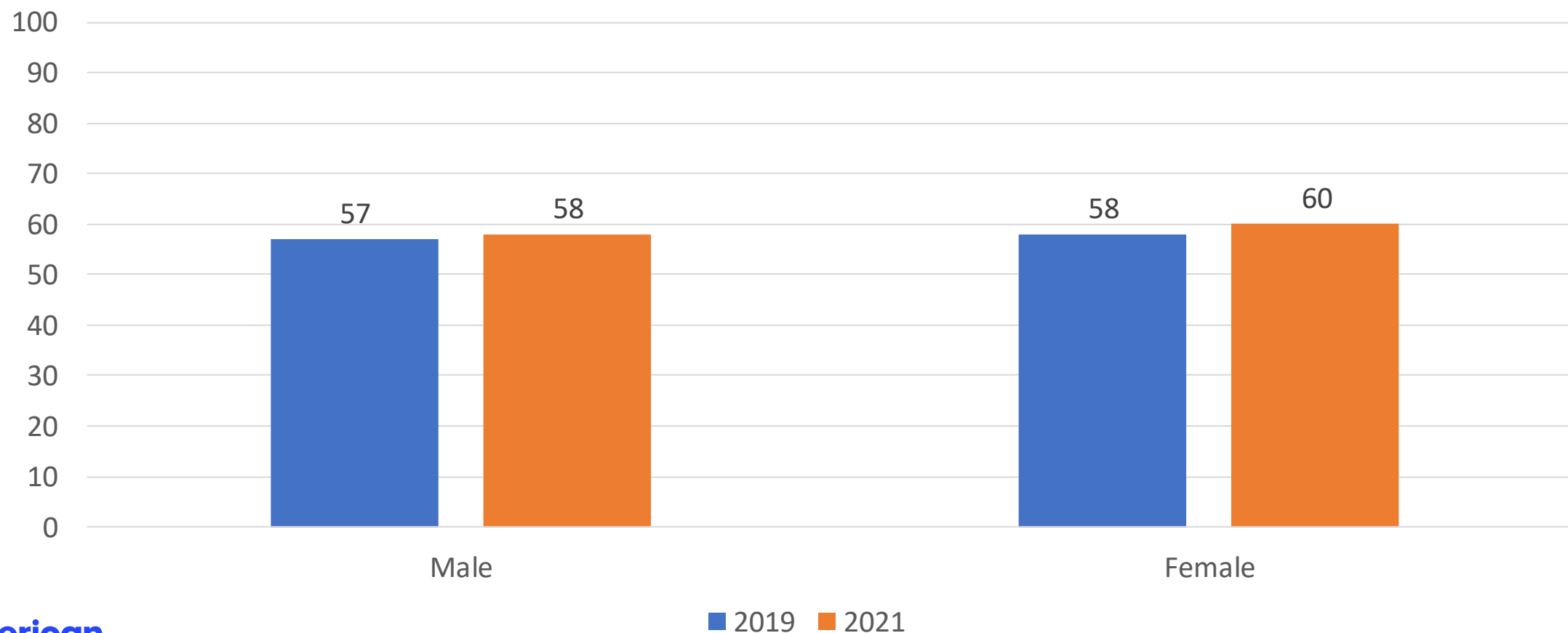
Changes in Age Adjusted UTD CRC Screening Prevalence between 2019 and 2021 by Insurance and Age



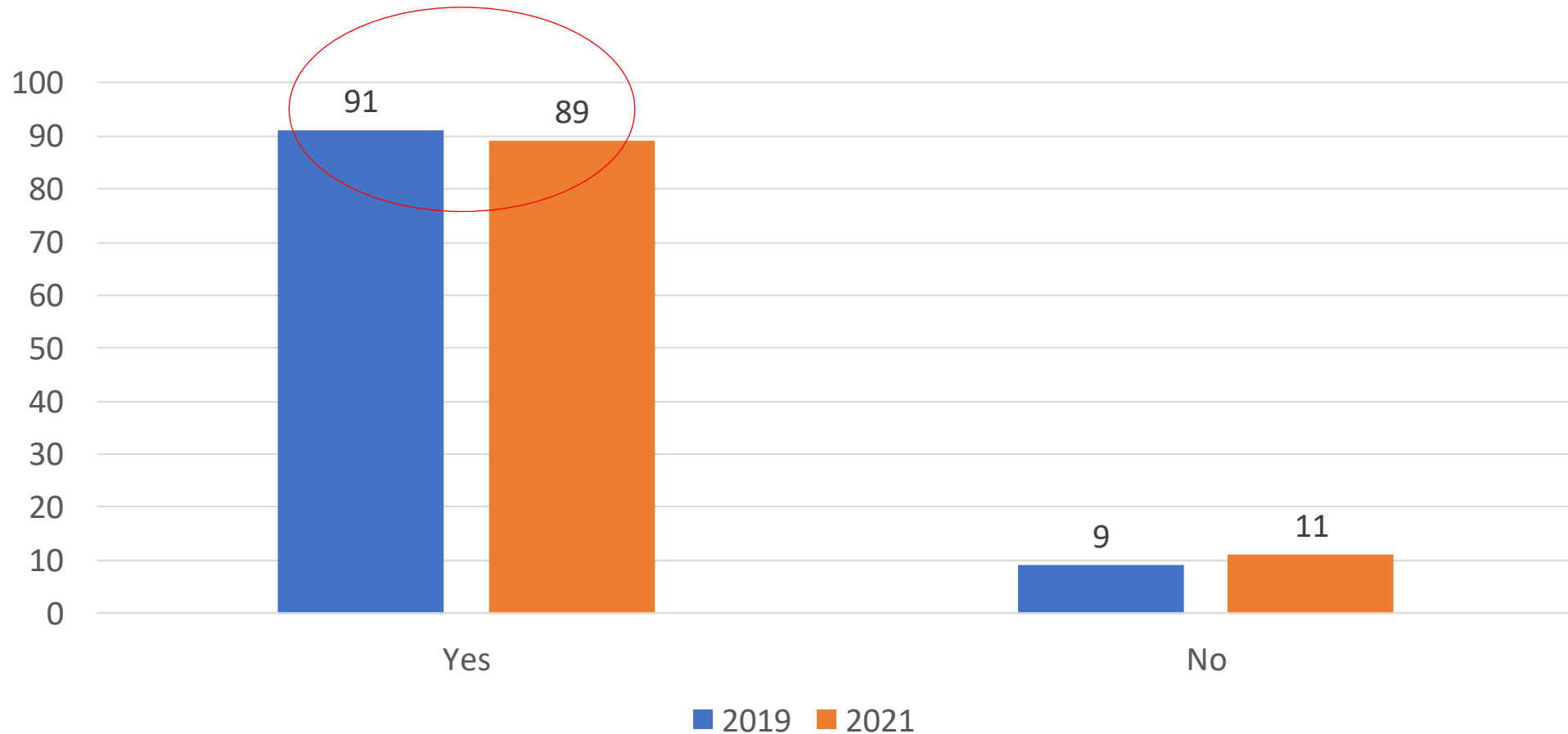
Changes in Age Adjusted UTD CRC Screening Prevalence between 2019 and 2021 by Race – Aged 45+



Changes in Age Adjusted UTD CRC Screening Prevalence between 2019 and 2021 by Sex – Aged 45+



Percentage of doctor visit in the past 12 months for adults aged 45+



Unadjusted and Adjusted Prevalence and PRs of Recent Cancer Screening According to Year, Behavioral Risk Factor Surveillance System 2014, 2016, 2018, and 2020

Table 2. Unadjusted and Adjusted Prevalence and PRs of Recent Cancer Screening According to Year, Behavioral Risk Factor Surveillance System 2014, 2016, 2018, and 2020

Prevalence type	Prevalence, %				PR (95% CI)		
	2014	2016	2018	2020	2016 vs 2014	2018 vs 2016	2020 vs 2018
Unadjusted							
Breast	62.0	61.7	61.6	57.8	1.00 (0.98-1.01)	1.00 (0.98-1.01)	0.94 (0.92-0.96)
Cervical	53.8	58.5	58.3	51.9	1.09 (1.07-1.10)	1.00 (0.98-1.01)	0.89 (0.87-0.91)
Any CRC testing	23.7	24.9	25.7	25.9	1.05 (1.03-1.07)	1.03 (1.01-1.05)	1.01 (0.98-1.04)
Colonoscopy	15.4	15.8	15.6	13.2	1.03 (1.00-1.06)	0.99 (0.96-1.01)	0.85 (0.82-0.88)
Stool testing	9.9	10.6	11.5	12.3	1.07 (1.03-1.11)	1.08 (1.04-1.13)	1.07 (1.03-1.12)
Adjusted ^a							
Breast	62.3	61.8	61.5	57.5	0.99 (0.98-1.00)	0.99 (0.98-1.01)	0.94 (0.92-0.95)
Cervical	53.9	58.4	58.3	51.9	1.08 (1.07-1.10)	1.00 (0.98-1.02)	0.89 (0.87-0.91)
Any CRC testing	24.1	25.0	25.5	25.6	1.03 (1.01-1.06)	1.02 (1.00-1.05)	1.00 (0.98-1.03)
Colonoscopy	15.4	15.9	15.6	13.2	1.03 (1.00-1.06)	0.98 (0.95-1.01)	0.84 (0.82-0.87)
Stool testing	10.2	10.6	11.4	12.1	1.04 (1.00-1.08)	1.07 (1.03-1.11)	1.07 (1.02-1.12)

Abbreviations: CRC, colorectal cancer; PR, prevalence ratio.

^a Models were adjusted for age, sex (CRC screening), state, and education.

Conclusions

- COVID-19 pandemic influence
- Increase in FOBT/FIT screening mitigated declines in colonoscopy
- Benefits of universal health coverage
- Less than high school, Hispanic, and Asian persons experienced increases in UTD colorectal cancer screening in 2021
- Uninsured persons had declines in UTD colorectal cancer screening rates in 2021

Thank You!

Acknowledgements:

- Ahmedin Jemal
- Surveillance and Health Equity Science Team
- American Cancer Society



Thank You!



Healthcare Effectiveness Data

Wednesday, November 16, 2:00 PM



Colorectal Cancer Screening HEDIS® Measure

Mary Barton, MD MPP

Vice President, Performance Measurement
National Committee for Quality Assurance

National Colorectal Cancer Roundtable
November 2022

About



~200 million people
in HEDIS-reporting
health plans

Colorectal Cancer Screening Measure

Adults age 50–75 years (enrolled for two years)

Screened for colorectal cancer by any of the following:

Fecal occult blood test/fecal immunochemical test during the year

Flexible sigmoidoscopy in the last 5 years

Colonoscopy in the last 10 years

Computed tomography colonography in the last 5 years

FIT-DNA in the last 3 years

Exclusions: frailty and advanced illness,
colorectal cancer, total colectomy

Overview

What do the data tell us?

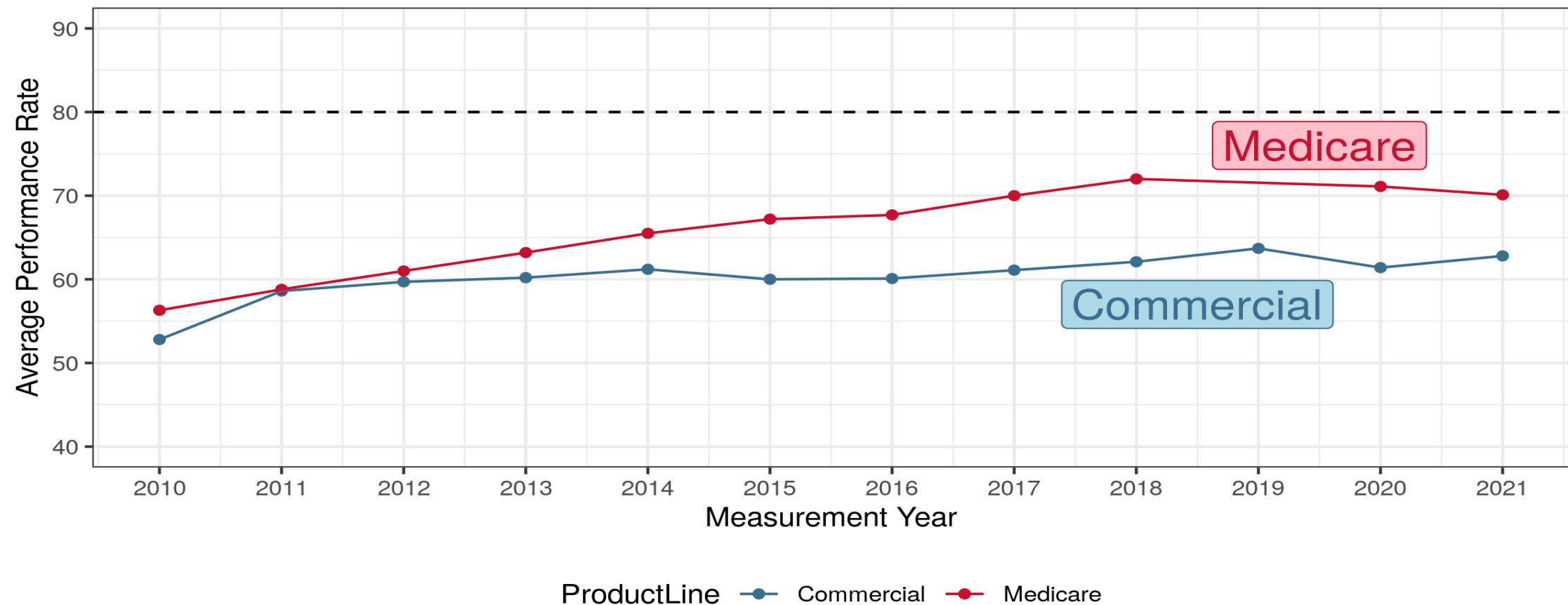
Commercial plans still not moving
fast

Medicare appears to have paused

COVID

Average National Performance, Measurement Year 2010–2018

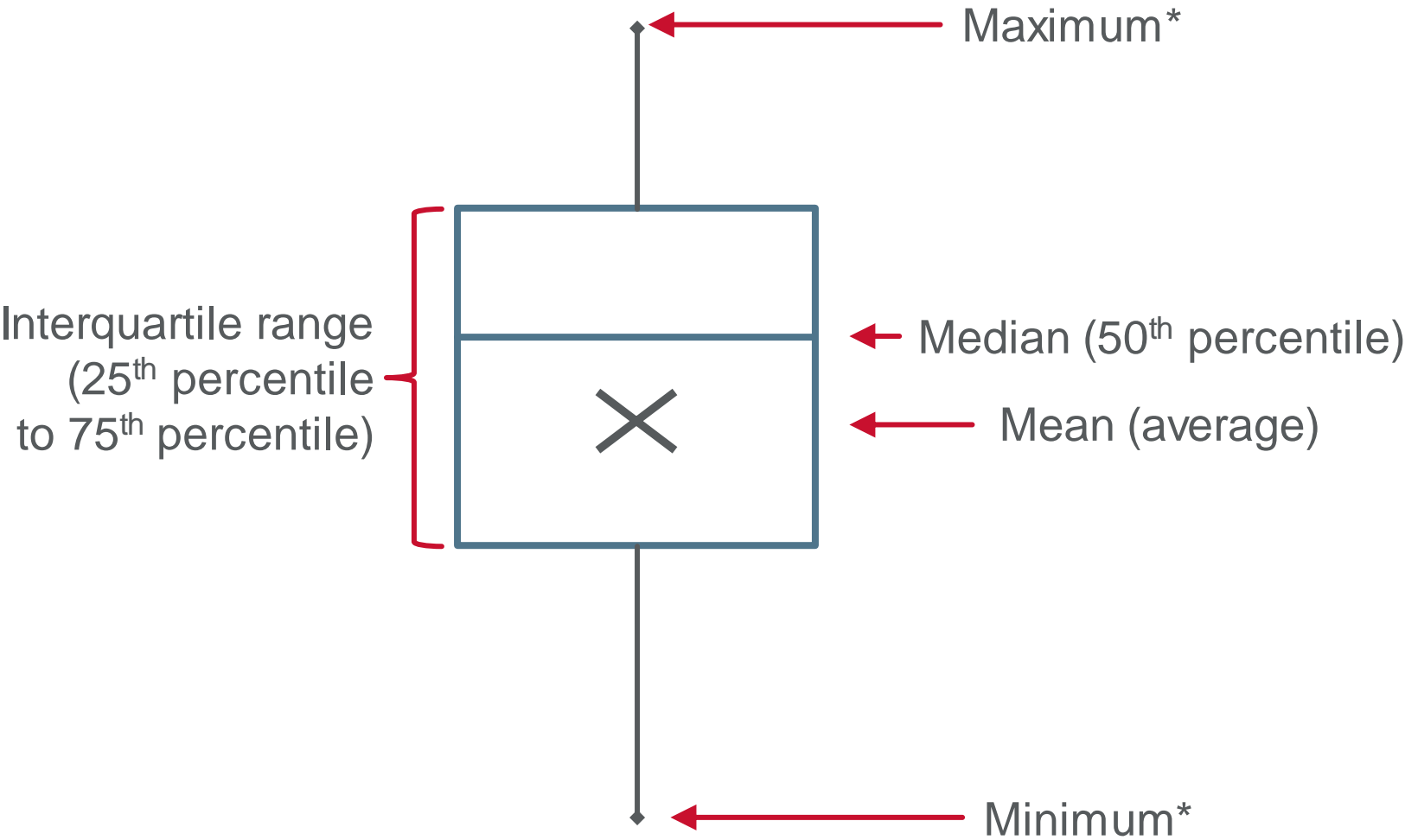
Average National Performance for COL
MY 2010 to 2021



Vertical dotted line indicates Trend Caution (2015, 2107 [Medicare], 2018, 2020)
Dot-Dash line indicates Trend Break (2016)

*Trending caution: added required exclusion to the Medicare product line for members 65 years of age and older living long-term in institutional settings.

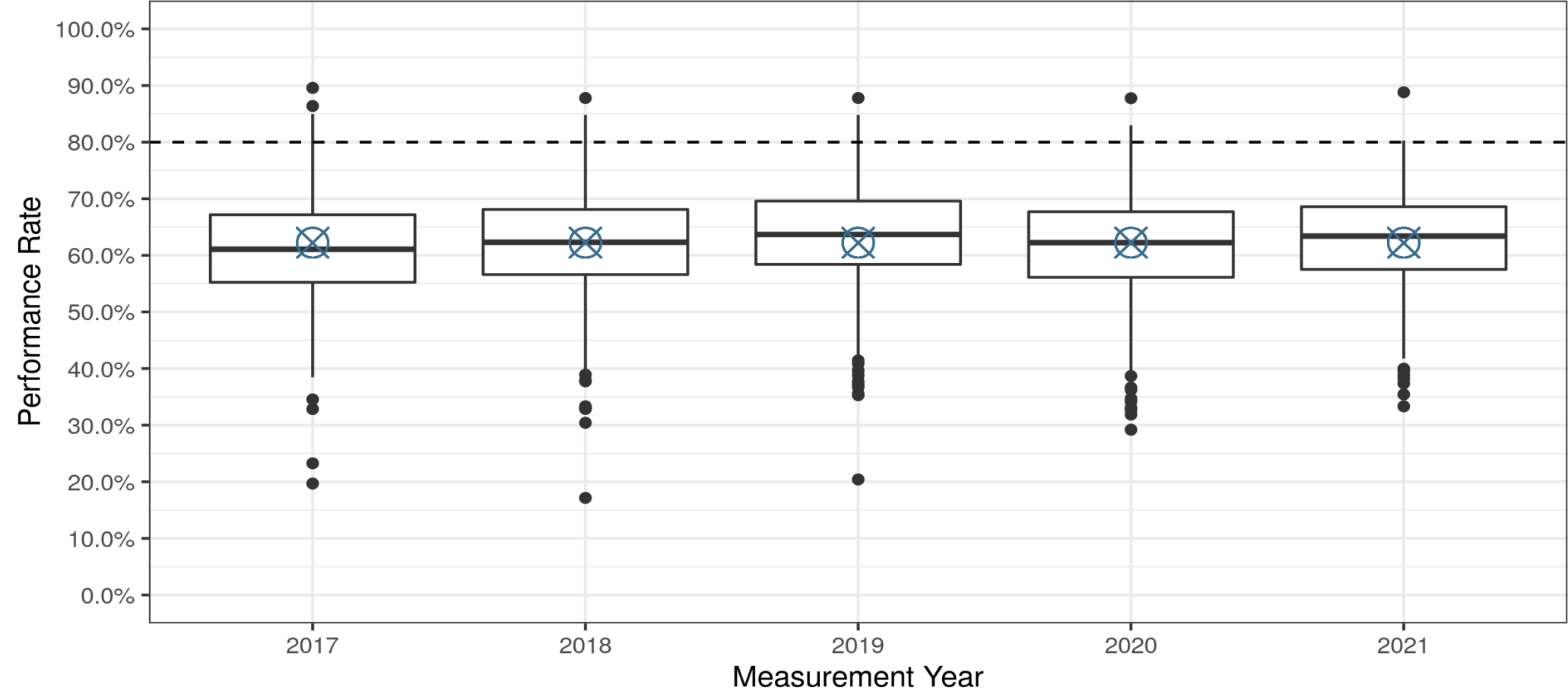
Box and Whisker Plot Key



*These values include outlier plans with particularly high or low performance

Commercial Health Plans

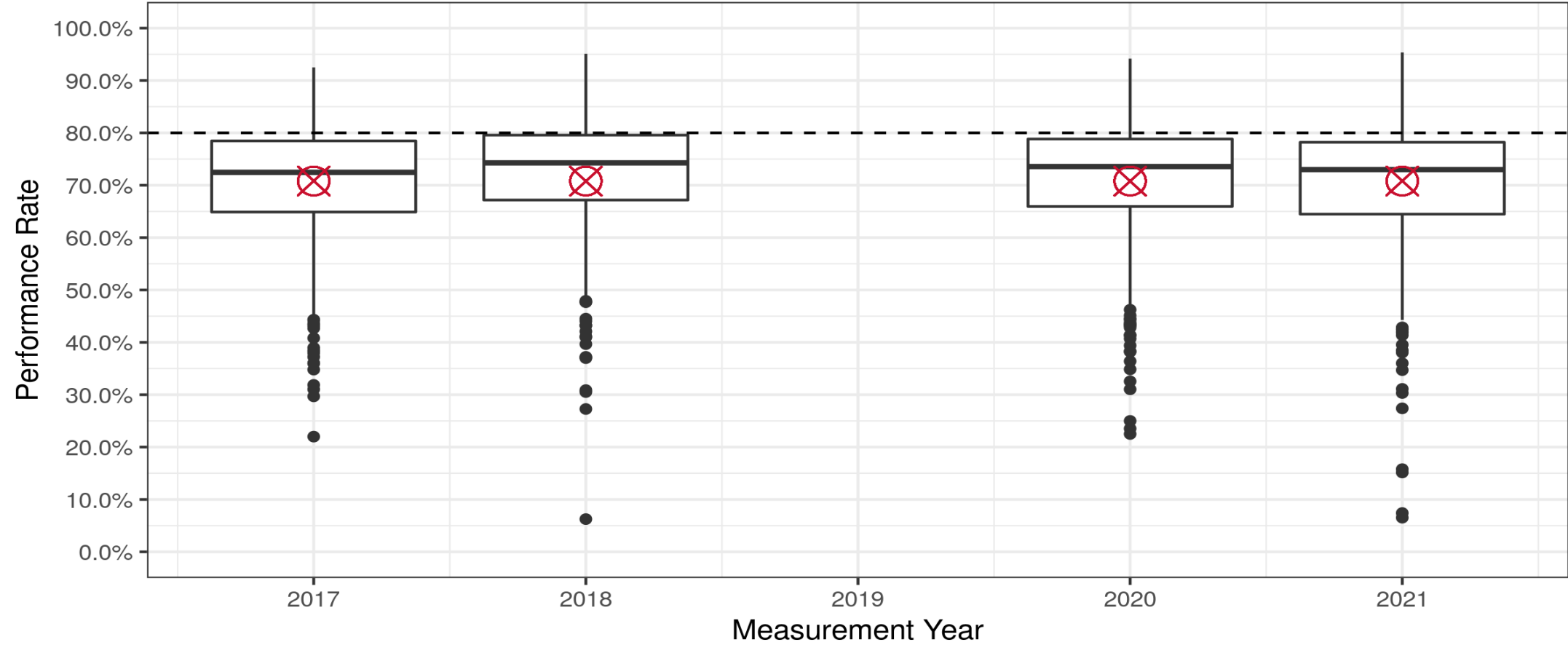
Rate Distribution for Commercial Health Plans
COL, MY 2017 to 2021



Trend Cautions in 2018 & 2020

Medicare Health Plans

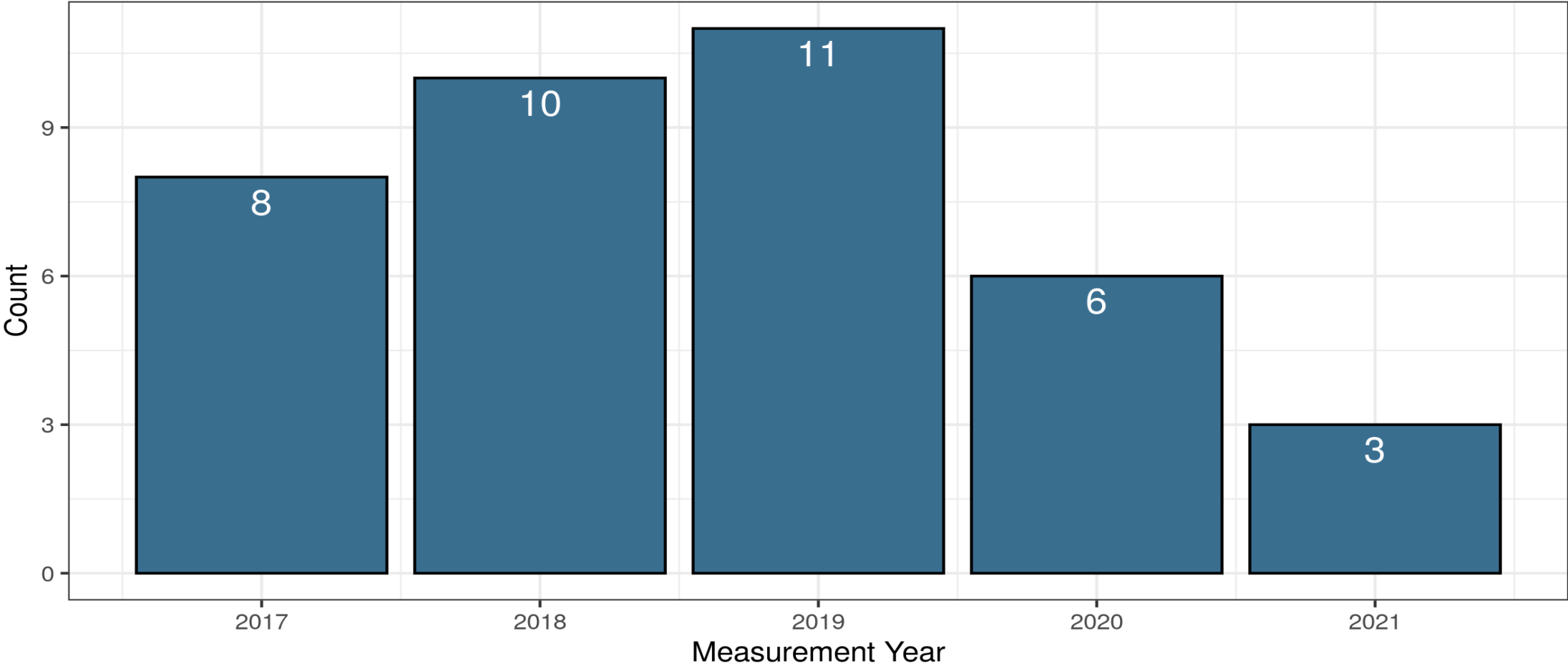
Rate Distribution for Medicare Health Plans
COL, MY 2017 to 2021



Trend Cautions in 2018 & 2020
Medicare data withheld in 2019 due to COVID

Number of Commercial Plans Over 80%

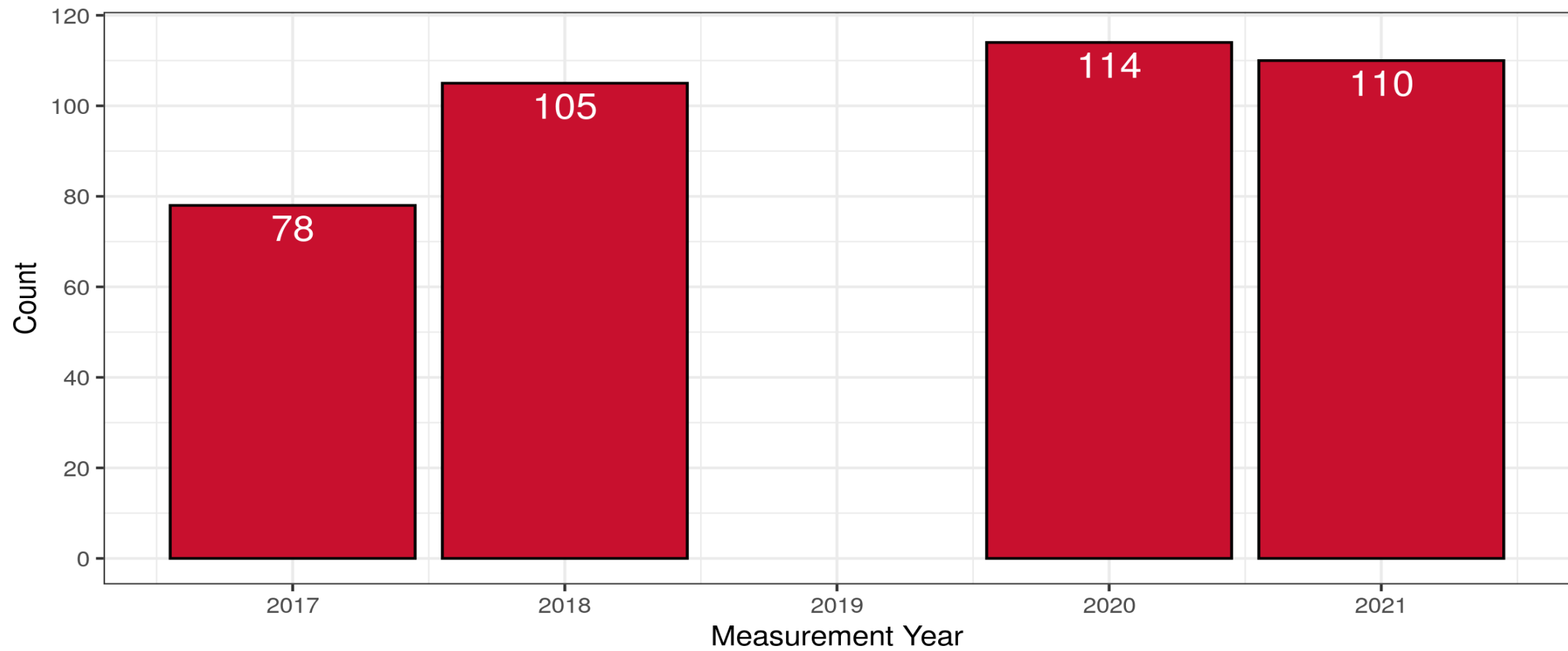
Count of Commercial Plans Over 80%
COL, MY 2017 to 2021



Trend Cautions in 2018 & 2020

Number of Medicare Plans Over 80%

Count of Medicare Plans Over 80%
COL, MY 2017 to 2021



Trend Cautions in 2018 & 2020
Medicare data withheld in 2019 due to COVID



Get in touch

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Thank You!



Uniform Data System

Wednesday, November 16, 2:00 PM



2021 UDS Update: Colorectal Cancer Screening

November 16, 2022

Amelia Khalil, MA

Quality, Office of Quality Improvement

Health Resources and Services Administration (HRSA), Bureau of Primary Health Care (BPHC)

Vision: Healthy Communities, Healthy People



Agenda

- UDS 2021 highlights
- Colorectal Cancer (CRC) screening in 2021
- Colorectal Cancer (CRC) in previous years
- What's next

HRSA Health Center Program Data Highlights in 2021



Health Center Program Fundamentals



Serve High Need Areas

- Must serve a high need community or population (e.g., HPSA, MUA/P)



Patient Directed

- Private non-profit or public agency that is governed by a patient-majority community board



Comprehensive

- Provide comprehensive primary care and enabling services (e.g., education, outreach, and transportation services)



No One is Turned Away

- Services are available to all, with fees adjusted based upon ability to pay



Collaborative

- Collaborate with other community providers to maximize resources and efficiencies in service delivery



Accountable

- Meet performance and accountability requirements regarding administrative, clinical, and financial operations



The Health Center Program is authorized under Section 330 of the Public Health Service (PHS) Act.

2021 Health Center Data Overview

For 57 years, health centers have worked to reduce health inequities by increasing access to affordable and high-quality primary health care for millions of people.

Expanding Access

- +6% total patients
- +9% total patient visits
- +6% patients seeking mental health services
- +7% workforce staff
- +5% health center sites
- 99% of health centers provided telehealth services



Advancing Equitable Care Delivery

- 63% patients identified as racial/ethnic minority
- 90% patients had incomes $\leq 200\%$ Federal Poverty Guidelines
- 74% of health centers screened patients for social risk factors



Improving Clinical Quality

- 13 of 18 of clinical quality measures improved
- 90% of health centers improved at least 6 of 18 clinical quality measures
- 45% of health centers have met or exceeded the Healthy People 2030 hypertension target



Source: Uniform Data System, 2020-2021.
Note: 1,373 health centers reported UDS 2021.

Expanding Access to the Health Center Model of Care

In 2021, HRSA-funded health centers provided comprehensive primary care to a record **30.2 million patients**, a **43% increase over the past 10 years**.

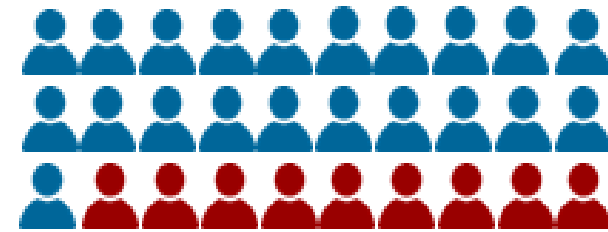
2012



- **21.1 million patients**
- **1,198 health centers**
- **Over 8,900 delivery sites**

VS.

2021



- **30.2 million patients**
- **1,373 health centers**
- **Over 14,000 delivery sites**

 = 1,000,000 patients

Source: Uniform Data System, 2012, 2021 - Table 3B
¹EHBs UDS Rollup Report, 2012 and 2021



Advancing Health Equity

Health centers provide affordable, high-quality primary health care to **more than 30 MILLION** people in the U.S. each year. That includes:

1 in 9

children & adolescents



1 in 5

rural residents



1 in 3

living in poverty



63%

identify as racial and/or ethnic minorities



Nearly **1.3M** experiencing homelessness

1M+ agricultural workers

Nearly **770K** school-based health center patients

Nearly **390K** Veterans

HRSA
Health Resources & Services Administration



Source: Uniform Data System, 2021 - Table 3A, Table 3B, Table 4, Table 6A

*Poverty defined as having income $\leq 100\%$ Federal Poverty Guidelines

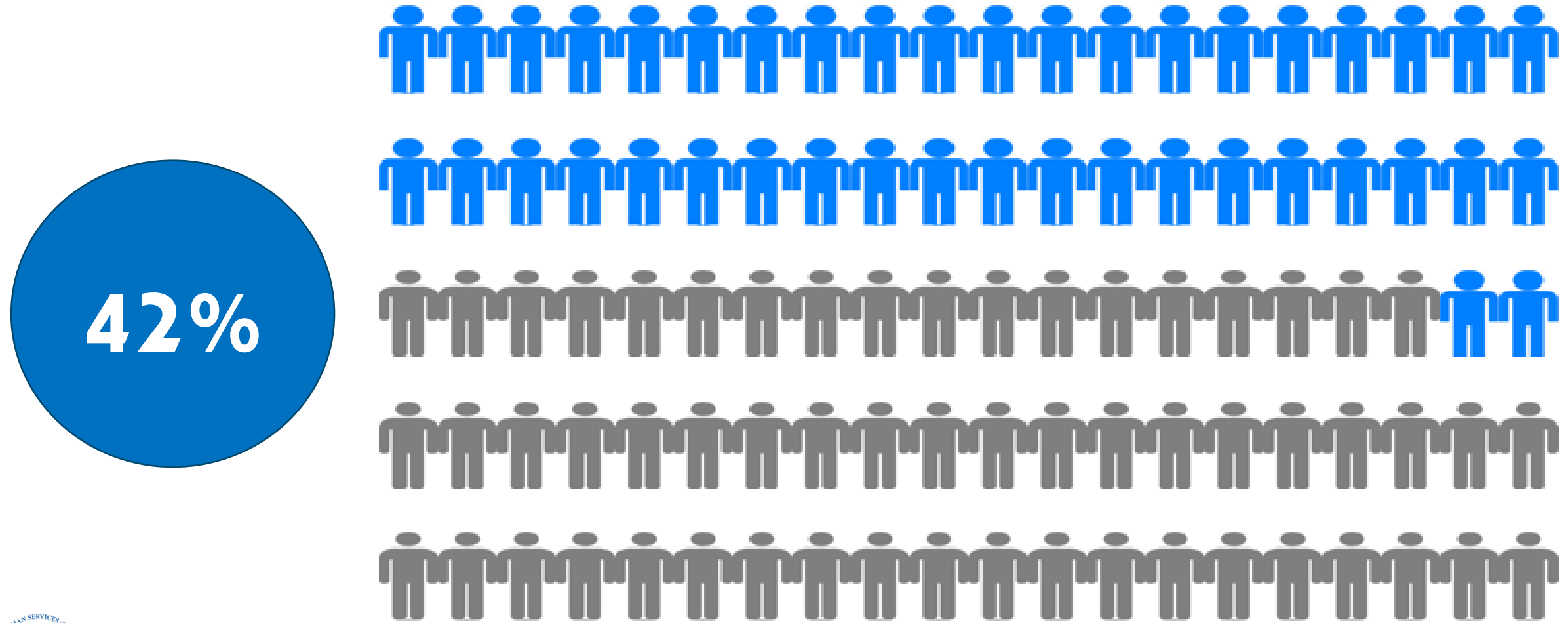
Colorectal Cancer Screening in 2021

Patients: 2021 UDS Colorectal Cancer Screening Rates

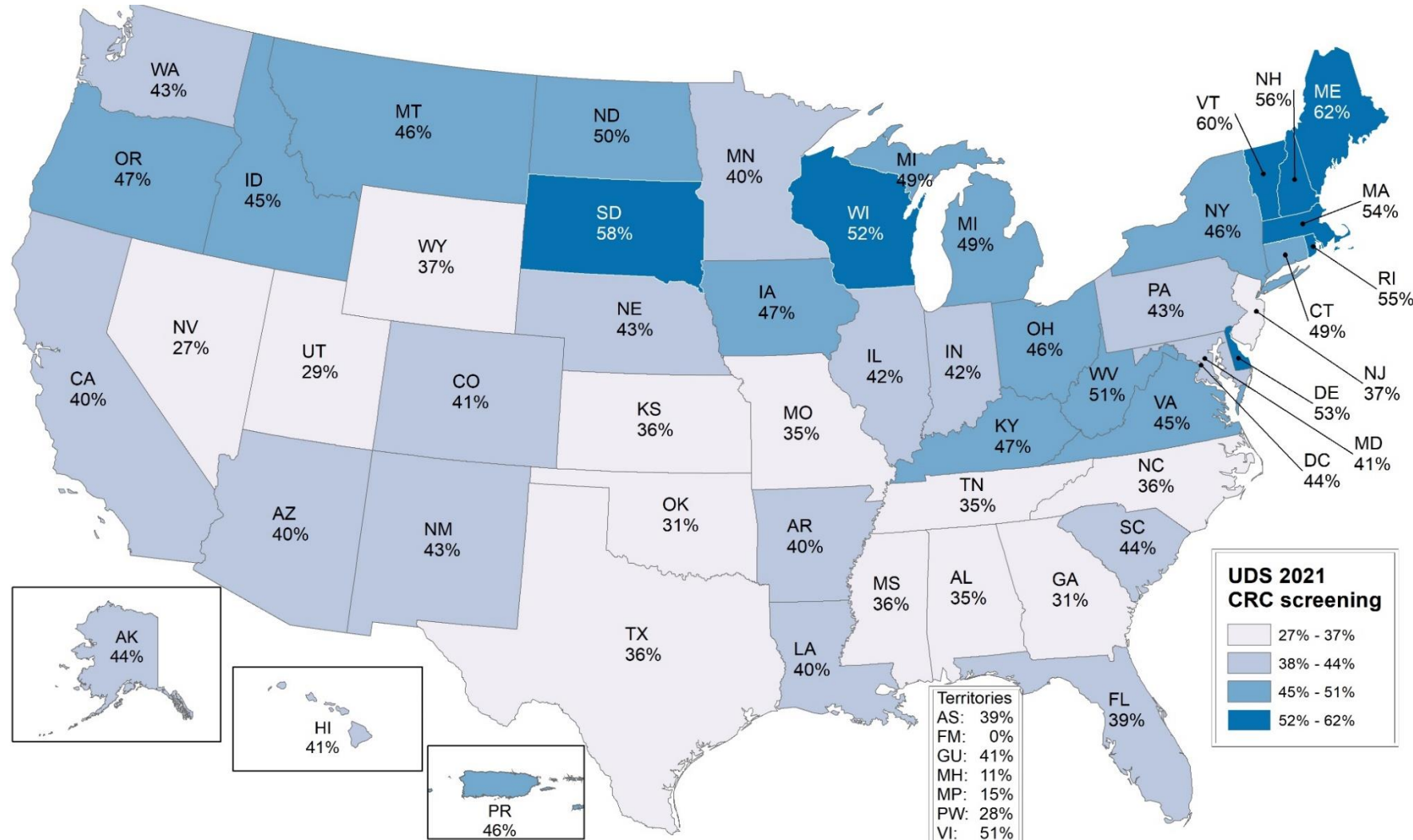


eCQM: CMS130v6 Ages 50- 75

Impact: 2021 UDS Colorectal Cancer Screening Rates

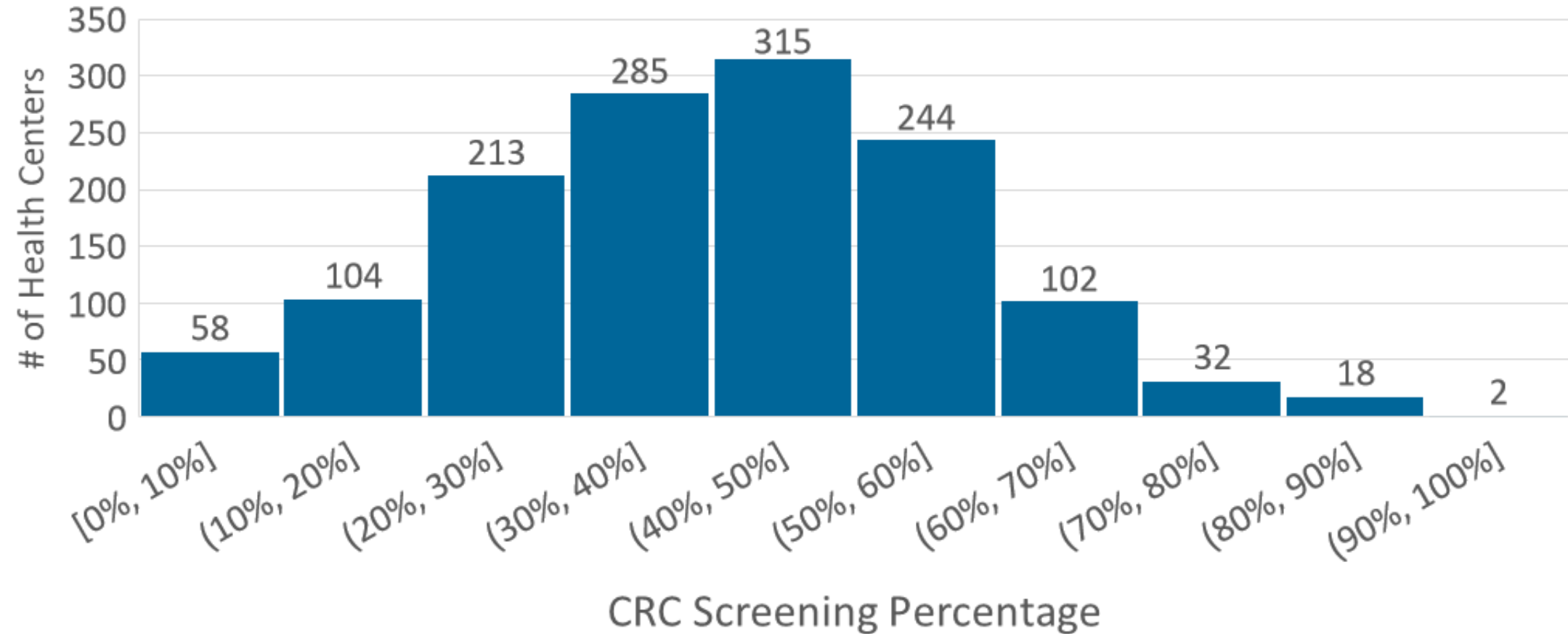


UDS 2021: Colorectal Cancer Screening (42%)



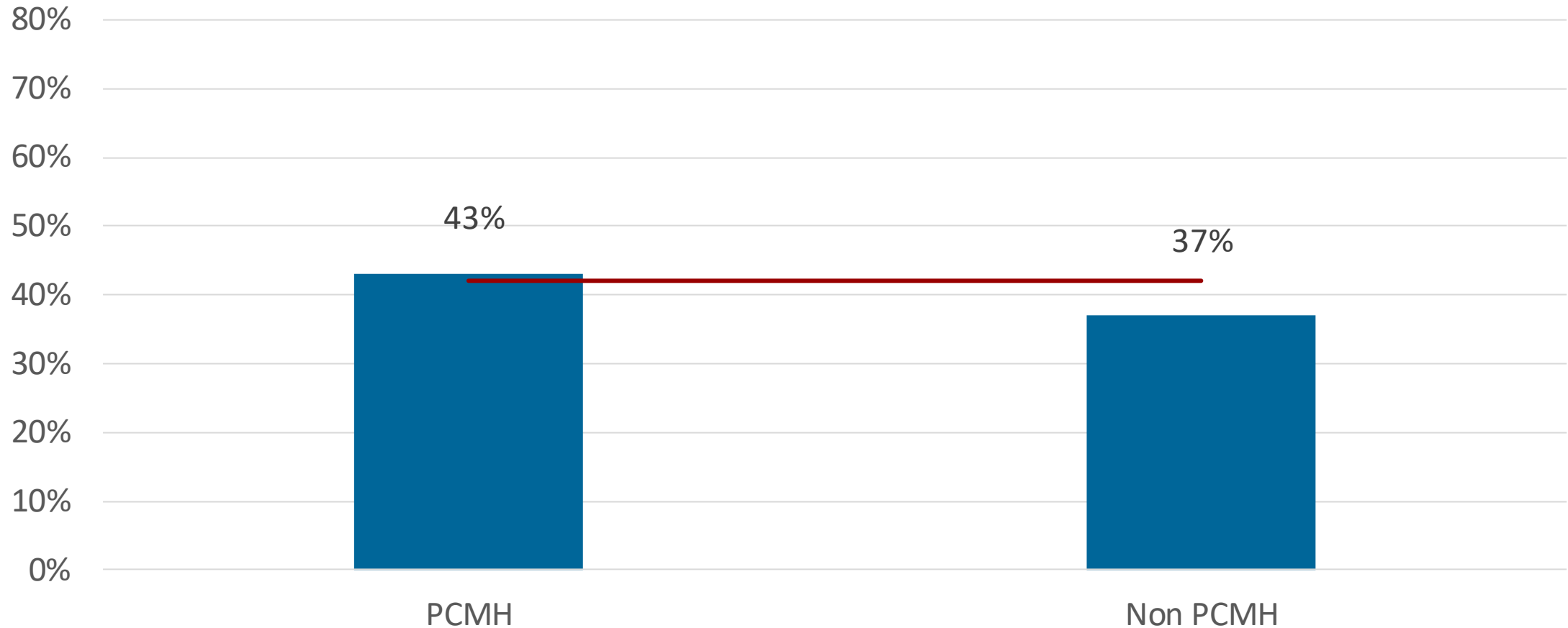
eCQM:CMS130v6 Source: Uniform Data Systems 2021

Frequency distribution of health centers by screening percentage



2021 UDS Colorectal Cancer eCQM: CMS130v6

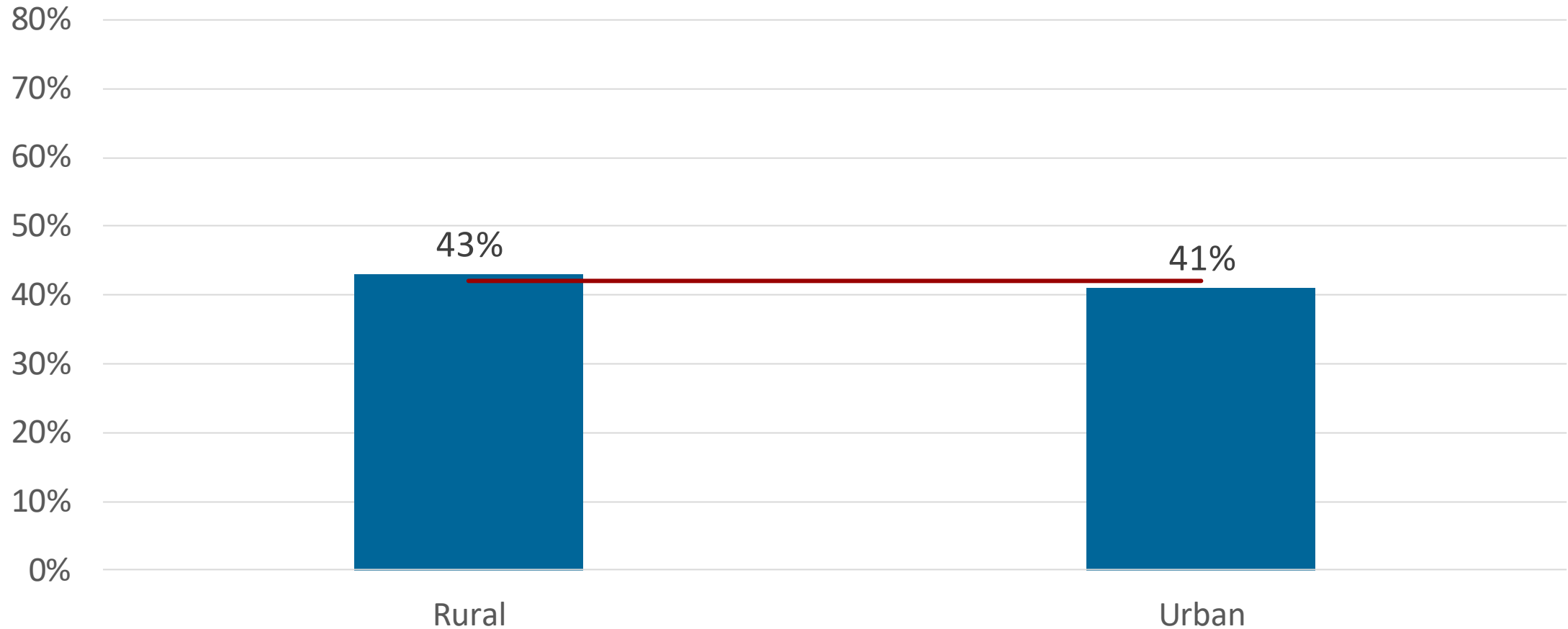
By PCMH status (Health Center Program only)



Source: Uniform Data System, 2020



2021 UDS Colorectal Cancer eCQM: CMS130v6: Urban vs Rural (Health Center Program only)



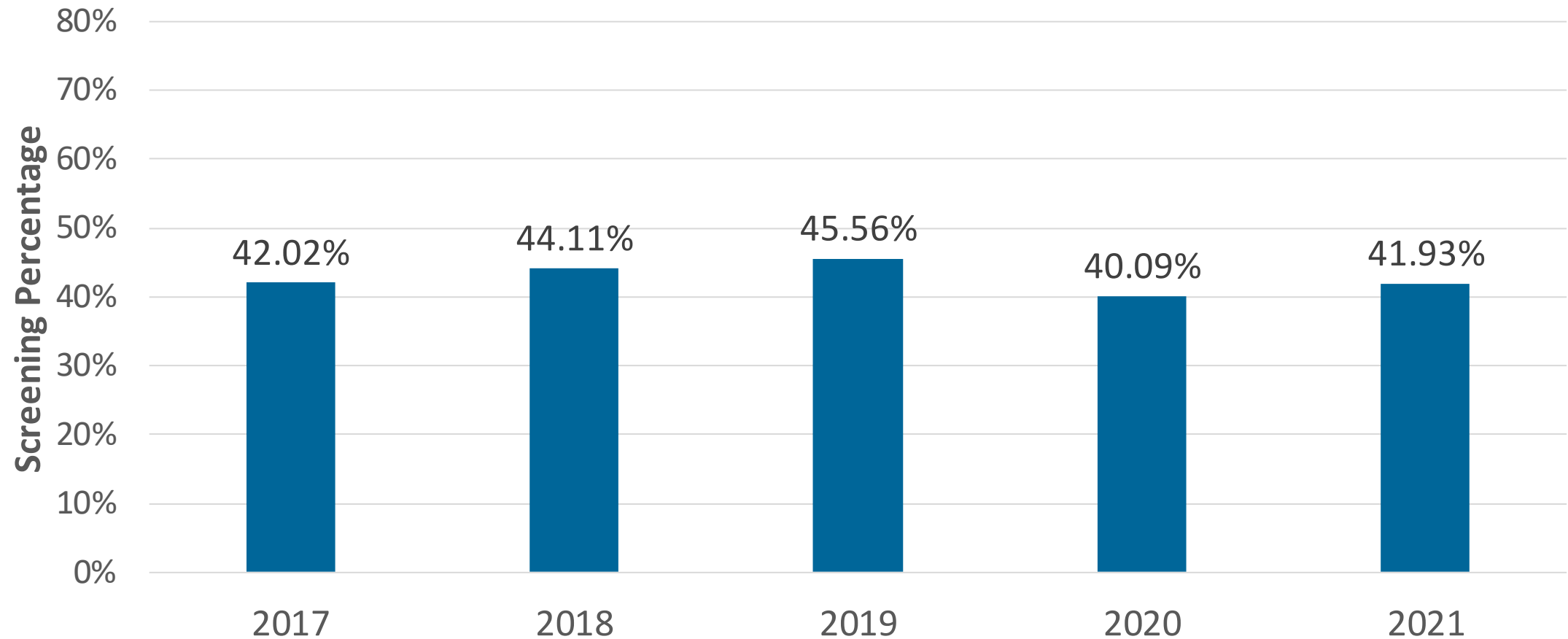
Source: Uniform Data System, 2021



Colorectal Cancer Screening Trends



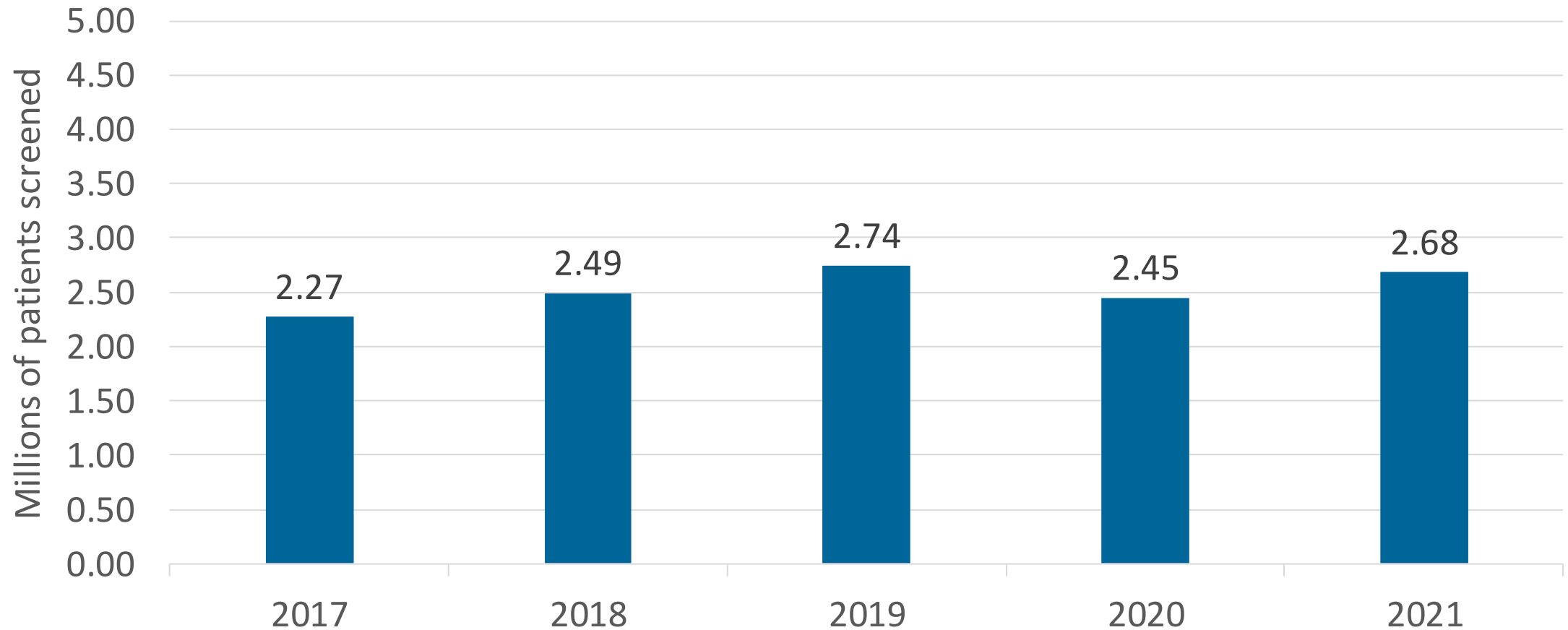
UDS Colorectal Cancer Screening Rates



Source: Uniform Data System 2021



UDS Colorectal Cancer: Number of Patients screened



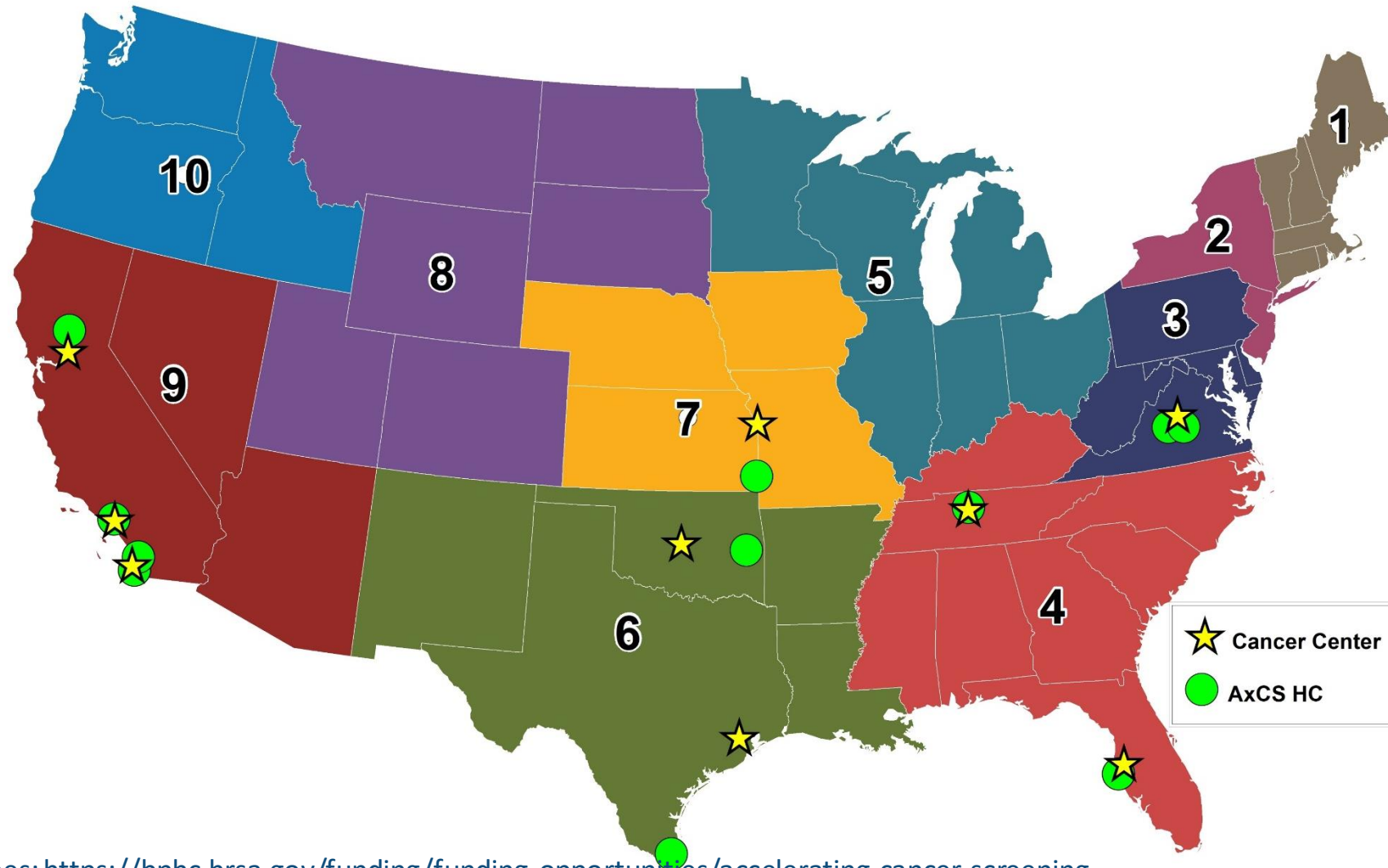
Source: Uniform Data System 2021

What's Next

FY2022 Accelerating Cancer Screening (AxCS) Award Summary



AxCS Awardees by State and Region



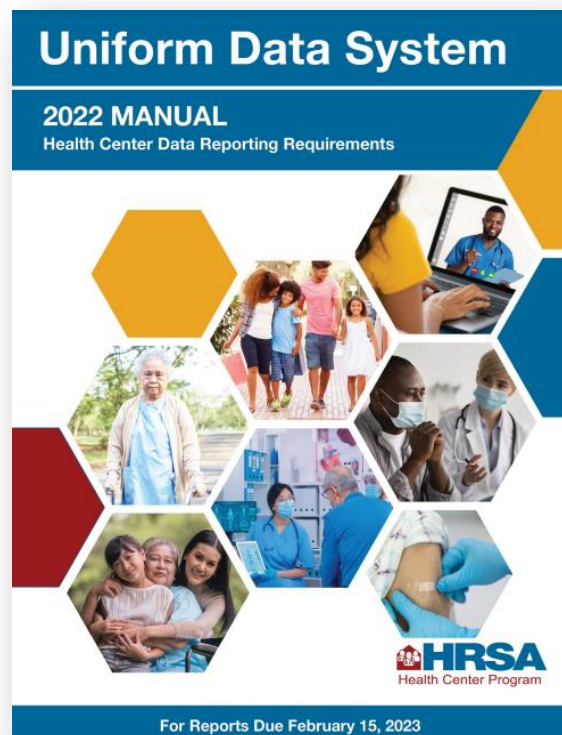
AxCS list of awardees: <https://bphc.hrsa.gov/funding/funding-opportunities/accelerating-cancer-screening>

Awardees and their focus areas

HRSA Health Center	State	Breast Cancer	Cervical Cancer	Colorectal Cancer
Chinatown Service Center	CA		Y	
Family Health Centers Of San Diego, Inc.	CA			Y
Neighborhood Healthcare	CA	Y	Y	Y
Ampla Health	CA			Y
Community Health Centers Of Pinellas, Inc.	FL			Y
Community Health Centers Of Southeast Kansas, Inc.	KS	Y	Y	Y
Stigler Health & Wellness Center Inc.	OK	Y	Y	Y
Matthew Walker Health Center	TN	Y	Y	Y
Su Clinica Familiar	TX	Y	Y	Y
Blue Ridge Medical Center Inc.	VA	Y	Y	Y
Central Virginia Health Services, Inc.	VA			Y



UDS Reporting Resources



2022

[2022 UDS Manual](#)

2022 UDS Reporting Period Jan. 1 – Feb. 15, 2023

2023

UDS+ FHIR Implementation Guide & UDS+ File Instructions

2023 UDS PAL (Summer 2022 release)

2023 UDS Manual (Spring 2023 release)

2023 UDS Reporting Period Jan. 1 – Feb. 15, 2024



[UDS Training and Technical Assistance Microsite– Technical Assistance Contacts](#)



Questions



Thank You!

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Bureau of Primary Health Care (BPHC)

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Appendix: Data Table: UDS Colorectal Cancer: Number of patients screened

Year	Number of patients screened in millions
2017	2.27
2018	2.49
2019	2.74
2020	2.45
2021	2.68

Appendix: Data Table: UDS Colorectal Cancer Screening Rates

Year	CRC screening percentage
2017	42.02%
2018	44.11%
2019	45.56%
2020	40.09%
2021	41.93%

Appendix: Data Table: Frequency distribution of health centers by screening percentage

Screening percentage range	Number of health centers
0-10	58
10-20	104
20-30	213
30-40	285
40-50	315
50-60	244
60-70	102
70-80	32
80-90	18
90-100	02

Appendix: Data Table: UDS 2021: Colorectal Cancer Screening (42%)

State Abbreviation	CRC Screening rate
PW	0%
MH	1%
AS	10%
GU	17%
FM	20%
NV	27%
UT	29%
OK	31%
GA	31%
VI	31%
AL	35%
MP	35%
MO	35%
TN	35%
NC	36%
TX	36%
MS	36%
KS	36%
NJ	37%
WY	37%

State Abbreviation	CRC Screening rate
FL	39%
MN	40%
AZ	40%
CA	40%
AR	40%
LA	40%
HI	41%
CO	41%
MD	41%
IN	42%
IL	42%
NE	43%
WA	43%
PA	43%
NM	43%
AK	44%
DC	44%
SC	44%

State Abbreviation	CRC Screening rate
VA	45%
ID	45%
NY	46%
PR	46%
MT	46%
OH	46%
OR	47%
IA	47%
KY	47%
CT	49%
MI	49%
ND	50%
WV	51%

State Abbreviation	CRC Screening rate
WI	52%
DE	53%
MA	54%
RI	55%
NH	56%
SD	58%
VT	60%
ME	62%





Thank You!



Q&A

Thank You!



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