

Profiles of Success: Innovations and Best Practices from Health Plans



Concurrent Session
November 21, 2024
11:00 AM – 12:15 PM



Speakers

Moderator: **Nikki Hayes**, MPH, Centers for Disease Control and Prevention

- **Terry Richoux**, Taking Aim at Cancer in Louisiana, Inc.
- **Brent Wallis**, MD, Peoples Health/UnitedHealthcare M&R LA/MS
- **Christopher R. Cogle**, MD, Florida Medicaid, Florida Agency for Health Care Administration (virtual)
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- **Katie Lucey**, Exact Sciences

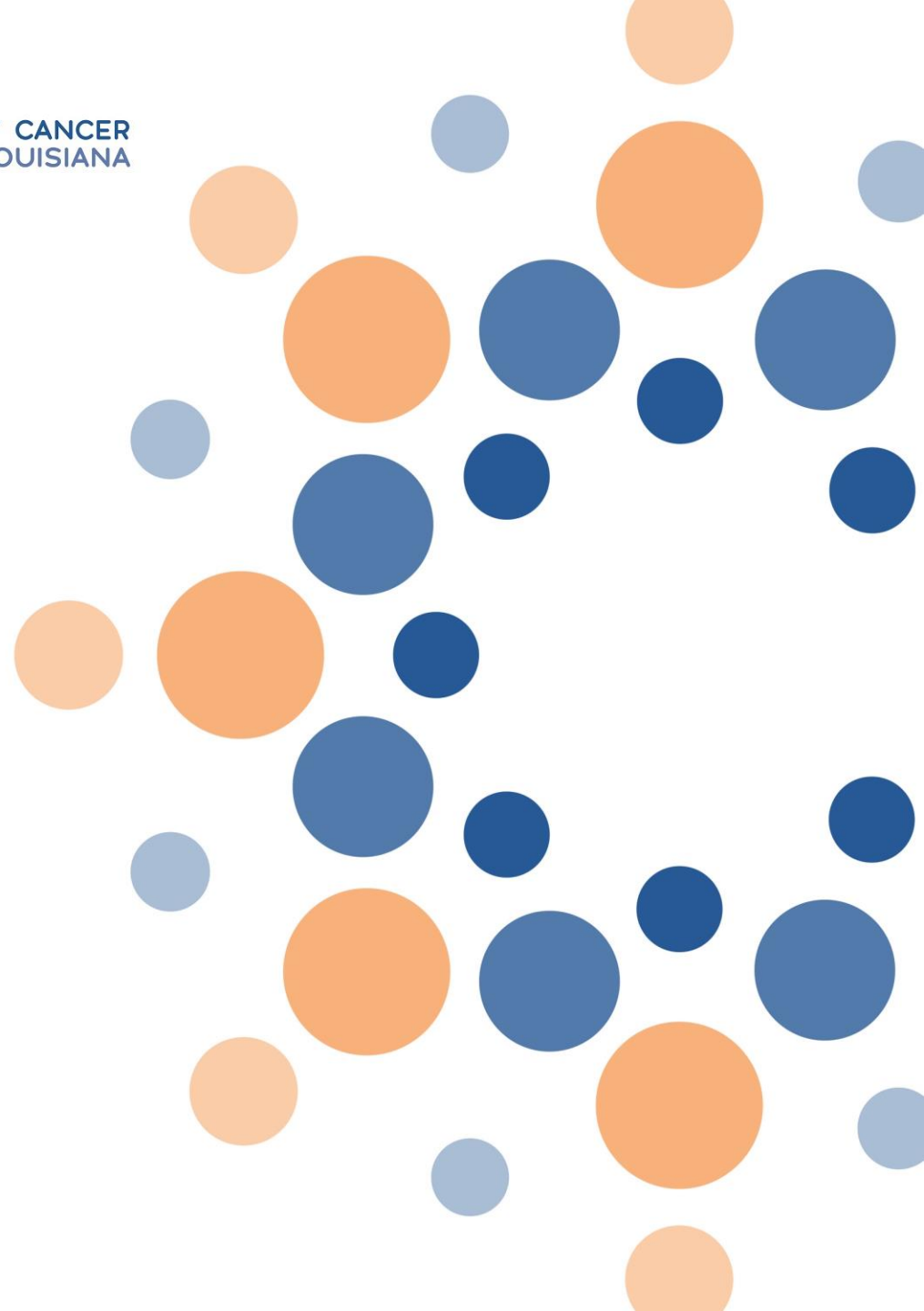
Learn more about our 2024 ACS NCCRT Annual Meeting **speakers** by reading their **bios**.





Louisiana Payer Council

November 21, 2024



Profiles of Success: Innovations and Best Practices for Health Plans



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Where Did we Begin – Payer Summit Oct 2019

Strategic Planning

Cancer Screening Registry

- Contributing Data

Community Health Workers

- How to Cost Share
- Utilizing More Efficiently

Internal Policies

- Examine Screening Policies

Where are We?



Cancer Screening Registry

Identified Model & identified data elements

Created Framework for Pilot (CRC)

Cost Sharing for CHWs

Piloted MCO CHW Model

Developed CRC United Voice Piece

Policy Work

Adopted CRC as Quality Improvement Measure

Expanded Coverage for CRC & SB190 Passage



TAKING AIM AT CANCER
IN LOUISIANA



LOUISIANA DEPARTMENT OF HEALTH

TAKING AIM AT CANCER IN LOUISIANA

LIVE LIFE GET SCREENED

Know your options for colorectal cancer screening

WHY GET A SCREENING?

Getting screened regularly is one of the best ways to prevent colorectal cancer. It can help find cancer even with no symptoms. And getting a colonoscopy isn't the only test available. There are some you can do right in the privacy of your own home.

If you have no family history of colorectal cancer, the American Cancer Society recommends that you get screened starting at 45 years old. **If you're African American, your risk is greater, so it is important to talk to your doctor about screenings.**

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Community Plan



TAKING AIM AT CANCER
IN LOUISIANA

YOUR HEALTH YOUR WAY

You may be eligible for any of the preventive screening tests below at no cost with an in-network provider.

1

EVERY YEAR

FIT Stool Test

- Detects hidden blood in the stool
- Done at home
- Risk-free
- No prep required
- If test is positive, colonoscopy is recommended

3

EVERY 3 YEARS

Stool DNA

- Detects cancer and precancerous cells
- Done at home
- No prep required
- Can occasionally return false positive or false negative results
- If test is positive, colonoscopy is recommended

5

EVERY 5 YEARS

Flexible Sigmoidoscopy

- Doctor looks for and removes polyps in rectum and lower colon
- Special diet and bowel prep required
- Quick, safe, and does not require sedation
- Can miss small polyps

10

EVERY 10 YEARS

Colonoscopy

- Doctor looks for and removes polyps in rectum and entire colon
- Special diet and bowel prep required
- Sedation is likely, so you'll need a ride home
- Best test for preventing colorectal cancer

*A colon polyp is a small clump of cells that forms on the lining of the colon.

Talk to your doctor
today to decide which
test is right for you.





Tips on Engaging Health Plans in CRC Work

- TACL Engagement with Individual Payers
- Sharing of Deidentified Outcome Data to Drive Performance
- Governmental Engagement
- Health Plan involvement at the Board level - Hearing All Voices at the Table



How To Cultivate Internal Champions

- Persistence to Drive Engagement
- Both Clinical and Business Interest Represented (C-Suite)
- Non-judgmental and Transparent Sharing of Strategies
- Common Goals Across Organizations

Results

- Payers made CRC Priority
- Increase in screening rates 2022 - 23
- Narrowing of Disparities trend observed since 2021



Colorectal Cancer Screening

- Reported percent screened is increasing
 - Avg. % change: 15.76%
 - 7/8 payers reported increases
- Average percent screened in 2023: 41.20%
- Variation among payers remains
 - Range ('23): 37

Preliminary: Colorectal Cancer Screening Percentages by Payer ('22 & '23)



THANK YOU

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Christopher R. Cogle, MD Video – See Recording

Key learnings from a public-private partnership to increase colon cancer screening rates:

1. **Maintain flexibility** in program structure and offering
2. **Set expectations** for screening outcomes based on member profile
3. **Inform members** that they are eligible to participate in the program and why screening matters
4. **Support members** through their screening with education and reminders
5. **Share data** throughout partnership to inform program design, progress, and outcomes



Questions



Thank You