

Information for Action # 2015-01

One out of four NYS adults aged 50-75 years have never received life-saving colorectal cancer screening tests.

Colorectal cancer is the second leading cause of death from cancer in New York State (NYS) and nearly 10,000 New Yorkers are diagnosed with colorectal cancer each year.¹ Screening reduces colorectal cancer incidence and mortality by detecting cancers at an early stage when treatment is most likely to be successful, and can prevent cancers through detection and removal of precancerous polyps.² Routine screening for colorectal cancer is recommended for average risk adults aged 50 to 75 through either a yearly take-home blood stool test, colonoscopy every 10 years, or flexible sigmoidoscopy every 5 years with a blood stool test every 3 years.

The NYS Department of Health has committed to a national movement toward eliminating colorectal cancer as a major public health problem. Organizations are working toward a shared goal of reaching an [80% screening rate for colorectal cancer by 2018](#). One analysis shows that approximately 33,000 lives could be saved annually if all people were screened periodically with recommended screening methods.³

About one-third of NYS adults aged 50 to 75 years are not up-to-date with colorectal cancer screening.⁴ Nearly one-quarter of NYS adults aged 50 to 75, 1.2 million New Yorkers, have never had any colorectal cancer screening test (Figure 1). Most adults who were never screened for colorectal cancer are insured (82.4%) and have a regular health care provider (81.6%), and just over 60% had a routine checkup within the last 12 months (Figure 2). These data demonstrate the important role the health care delivery system can play to increase colorectal cancer screening rates and prevent colorectal cancer deaths in NYS.

Figure 1. Colorectal cancer screening status, NYS adults aged 50-75 years, 2012 BRFSS

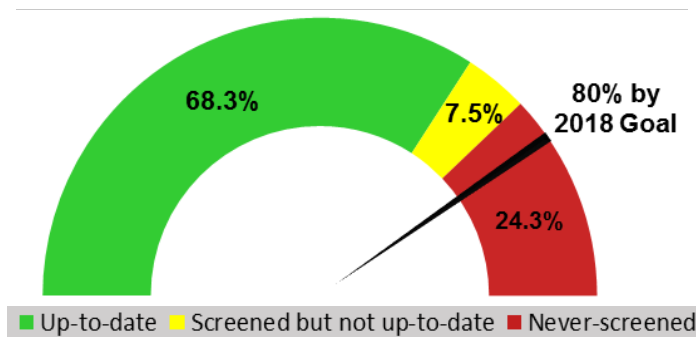
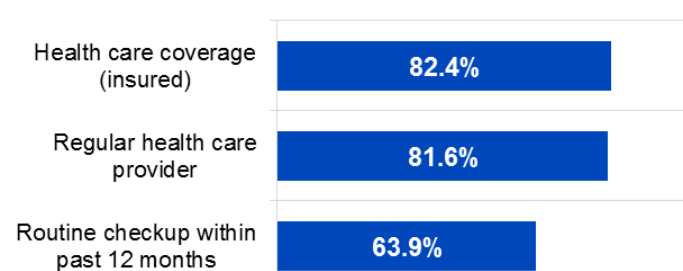


Figure 2. Health care access among never-screened adults aged 50-75 years, 2012 BRFSS



Data Source: New York State Behavioral Risk Factor Surveillance System (BRFSS), 2012

PUBLIC HEALTH OPPORTUNITY

Actions for Health Care Providers

- Encourage patients to obtain life-saving cancer screening tests by educating patients about the multiple screening options that are available, including simple take-home options.
- Utilize the influence of physician recommendation to systematically recommend all three screening test options to average-risk patients aged 50-75 years through strategies such as client reminders - lack of a physician recommendation for colon cancer screening is a significant barrier to obtaining recommended screening tests.

Actions for Health Plans and Insurance Carriers

- Educate constituents on colorectal cancer screening coverage and options.
- Address concerns about affordability, and remove any cost-related barriers to screening, such as charging co-pays and deductibles for all colonoscopies, including screening colonoscopies that result in the removal of polyps.

Contact: For more information about the data included and their specific implications for action, please send an email to DCDIPIFA@health.state.ny.us with IFA # 2015-01 in the subject line.

References:

¹New York State Cancer Registry. *Cancer Incidence and Mortality in New York State, 1976-2011*. <http://www.health.ny.gov/statistics/cancer/registry/>. Accessed December 12, 2014.

²Recommendation Summary. U.S. Preventive Services Task Force. September 2014. <http://www.uspreventiveservicestaskforce.org/Page/Topic/recommendation-summary/colorectal-cancer-screening>.

³Maciosek MV, Solberg LI, Coffield AB, Edwards NM, Goodman MJ. Colorectal cancer screening: health impact and cost effectiveness. *Am J Prev Med* 2006; 31(1):80-89.

⁴New York State Department of Health. Colorectal Cancer Screening. NYS Adults, 2012. BRFSS Brief. Number 1405

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