

Report from the Kentucky Colon Cancer Screening Advisory Committee

July 1, 2016 through June 30, 2018

Colon cancer is a significant health problem in Kentucky - it is the second leading cause of cancer death when rates for men and women are combined. Kentucky has the 4th highest colon cancer mortality rate (16.7/100,000) in the nation and ranks highest for incidence (new cases) of colon cancer at 49.2/100,000. With regular colon cancer screening, pre-cancerous polyps are found and removed before the turn into cancer. Kentucky has had good success over the years in raising colon cancer screening rates, however about 30% of Kentuckians have not been screened in accordance with the American Cancer Society (ACS) guidelines.

Multiple statutes have been enacted to address the problem of colon cancer in Kentucky. Kentucky Revised Statutes 214.540-544, establish and define the Kentucky Colon Cancer Screening Program (KCCSP) and the Kentucky Colon Cancer Screening Advisory Committee (KCCSAC). The KCCSP and KCCSAC were established for three purposes:

- 1) Increase colon cancer screening;
- 2) Reduce morbidity and mortality from colon cancer; and
- 3) Reduce the cost of treating colon cancer among citizens of the Commonwealth.

As part of KRS 214.544, the Kentucky Colon Cancer Screening Advisory Committee (KCCSAC), whose members are established in statute, provides recommendations for the overall implementation and conduct of the screening program, a colon cancer screening public awareness program and provides reports on program implementation, outcomes and recommendations. This report encompasses fiscal years July 2016 through June 2018.

As stated in the definitions of KRS 214.540 Section 3, “the provision of KRS 214.50 to 214.544 shall be limited to the amount of appropriations to the department for the Colon Cancer Screening Program”. State funding for the program was not made available to the Kentucky Department for Public Health during these two fiscal years. Further program implementation was put on hold and no screening services were provided.

The KCCSAC continued to meet and discuss the best way to modify the program design for future implementation. As reported in the June 2014 - July 2016 KCCSP report, the number of services provided by the program declined sharply after implementation of the Affordable Care Act and expansion of Medicaid, as the number of uninsured Kentuckians eligible for this program decreased. This increase in the number of low income Kentuckians who had insurance for colon cancer screening allowed KCCSAC to shift their focus to consider other needs. In particular, the KCCSAC identified issues related to avoidance of surveillance (follow-up) colonoscopies among people with symptoms of colon cancer, a history of having had polyps

removed, previous cancer diagnosis or certain high risk factors that require repeat colonoscopies at a more frequent interval than for preventive screening. These individuals are at higher risk for colon cancer in the future and the needed colonoscopy is no longer considered a screening service under insurance guidelines. Incurring the expense of a colonoscopy and related services (anesthesia, lab tests, pathology) is a significant burden for those with modest incomes and high deductible insurance plans. Therefore, individuals with an income less than 300% of poverty level and more than 5% out of pocket expenses for a surveillance colonoscopy have been identified as program eligible for the next program cycle when funding may once again become available.

Recommendations

Per KRS 214.544(7), the advisory committee is providing recommendations for future planning and implementation of the Kentucky Colon Cancer Screening Program. These recommendations for the program are to:

1. Operationalize a definition of underinsured;
2. Continue to promote public awareness activities which improve CRC screening rates;
3. Request that hospitals review their community benefit to include colon cancer screening;
4. Seek out grant opportunities to support increased CRC screening;
5. Collaborate with the Kentucky Cancer Foundation for potential support for colon cancer screening;
6. Continue to educate decision makers on gaps in funding for CRC screening.