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. When men and women rates are combined, it is the second leading cause of cancer death. Kentucky has the 4th highest colon cancer mortality rate (16.7/100,000) and the highest incidence rate (new cases) of colon cancer (49.2/100,000). Colon cancer is highly preventable. With regular colon cancer screening, precancerous polyps are found and removed before they develop into cancer. Kentucky has made significant progress 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 exist to address the problem of colon cancer in Kentucky. Kentucky Revised Statutes (KRS) 214.540 through KRS 214.544, 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.

Statue defines membership for the Kentucky Colon Cancer Screening Advisory Committee (KCCSAC). The committee provides recommendations for the overall implementation of the screening program, and provides this report on program implementation, outcomes, and recommendations for future actions. 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 was not budgeted for the Kentucky Department for Public Health during the two fiscal years. Subsequently, program implementation was put on hold and no screening services offered.

The number of services provided by the program declined sharply after implementation of the Affordable Care Act and Medicaid expansion. These programs increased the number of low income Kentuckians with insurance coverage for colon cancer screening, and allowed KCCSAC to shift their focus to consider other needs. The KCCSAC continued to meet and discuss the best way to modify the program design for future implementation. The KCCSAC identified the need to extend program support for individuals in need of surveillance (follow-up) colonoscopies. Individuals with symptoms of colon cancer, history of polyp removal, previous cancer diagnosis

or have certain high risk factors, 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 recommended colonoscopy is not a screening service under insurance guidelines. Incurring the expense of a colonoscopy and related services (anesthesia, lab tests, and pathology) could be a significant burden for those with modest incomes and high deductible insurance plans. If funding is available, individuals needing a surveillance colonoscopy with income less than 300% of poverty level and more than 5% out of pocket expense are eligible for the next program cycle.

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 that improve colorectal cancer (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; and
- 6. Continue to educate decision makers on gaps in funding for CRC screening.