



QUALITY TRANSFORMATION INITIATIVE

Colorectal Cancer Screening January 2022

Covered California is recommending colorectal cancer screening as one of four core quality measures for the Quality Transformation Initiative, which seeks to dramatically improve care by establishing significant and increasing financial consequences for Covered California's health plans with poor quality performance beginning in 2023. Importantly, this measure was chosen in consultation with Medi-Cal and CalPERS with the intent of aligning our quality accountability efforts.

In the United States, cancer is the second leading cause of death after heart disease. Among cancers, colorectal cancer ranks as the second most common cause of death after lung cancer.

Importantly, routine screening is extremely effective at reducing the risk of colorectal cancer. The benefits of screening include finding precancerous polyps so they can be removed *before* they turn into cancer, as well as detecting colorectal cancer early when treatment is most effective. Treatment for colorectal cancer in its earliest stage can lead to a 5-year survival rate of 90%.

The United State Preventive Services Task Force recommends that all adults between the ages of 45 and 75 receive colorectal cancer screening. Unfortunately, people without health insurance are less likely to be screened. Even when screening is available, many people are reluctant to get screened, with more than a third of adults not receiving recommended screenings. As a result, fewer than 40% of colorectal cancers are found at an early stage when treatment is more effective.

While the overall incidence of colorectal cancer has declined since the mid-1980s due to the effectiveness of screening, the incidence among younger adults has been increasing since the mid-1990s. Similarly, while colorectal cancer deaths have generally declined since 1970 due to a combination of prevention and earlier detection through screening, as well as improvements in treatment, there has been a rise in colorectal cancer deaths among those younger than 55.

There are also significant racial disparities in both colorectal cancer incidence and mortality. Compared to whites, African Americans have a 20% higher incidence of colorectal cancer and a 40% higher mortality. They are more likely to develop colorectal cancer at younger ages, be diagnosed at a later stage, and have the lowest five-year survival rate among all racial/ethnic groups.

The Centers for Disease Control has estimated the total annual medical cost of colorectal cancer care at \$14.1 billion. Additional societal impacts include:

- 11% of all cancer treatment costs in the United States are for colorectal cancer.
- Average Medicare health care spending for patients with newly diagnosed colorectal cancer ranges from \$40,000 to \$80,000, depending on the stage.
- On average, cancer survivors have annual losses in work productivity due to missed workdays and employment disability that are about \$1,000 higher compared to people without a cancer history. Some cancer survivors are not able to return to work, while others report not being able to perform all tasks because of illness or distress.

Based on Covered California claims data, 0.2% of enrollees are receiving care for colorectal cancer, which accounts for 2% of annual health care expenditures.

Covered California Health Plan Performance. In 2019, using the Colorectal Cancer Screening (NQF #0034) measure, four out of 14 health plan products performed below the 25th percentile of national performance. Five performed at or above the 50th percentile nationally, with only one plan at or above the 90th percentile. Overall, 44% of enrollees received below average care. Performance below the 50th percentile means that fewer than 55% of adults were appropriately screened for colon cancer.

In summary, because colorectal cancer usually takes years to develop, screening has a critical role to play in early detection and treatment. Measuring and incenting colorectal cancer screening across Covered California health plans through the Quality Transformation Initiative will help drive prevention of and improved outcomes for colorectal cancer for Californians.

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