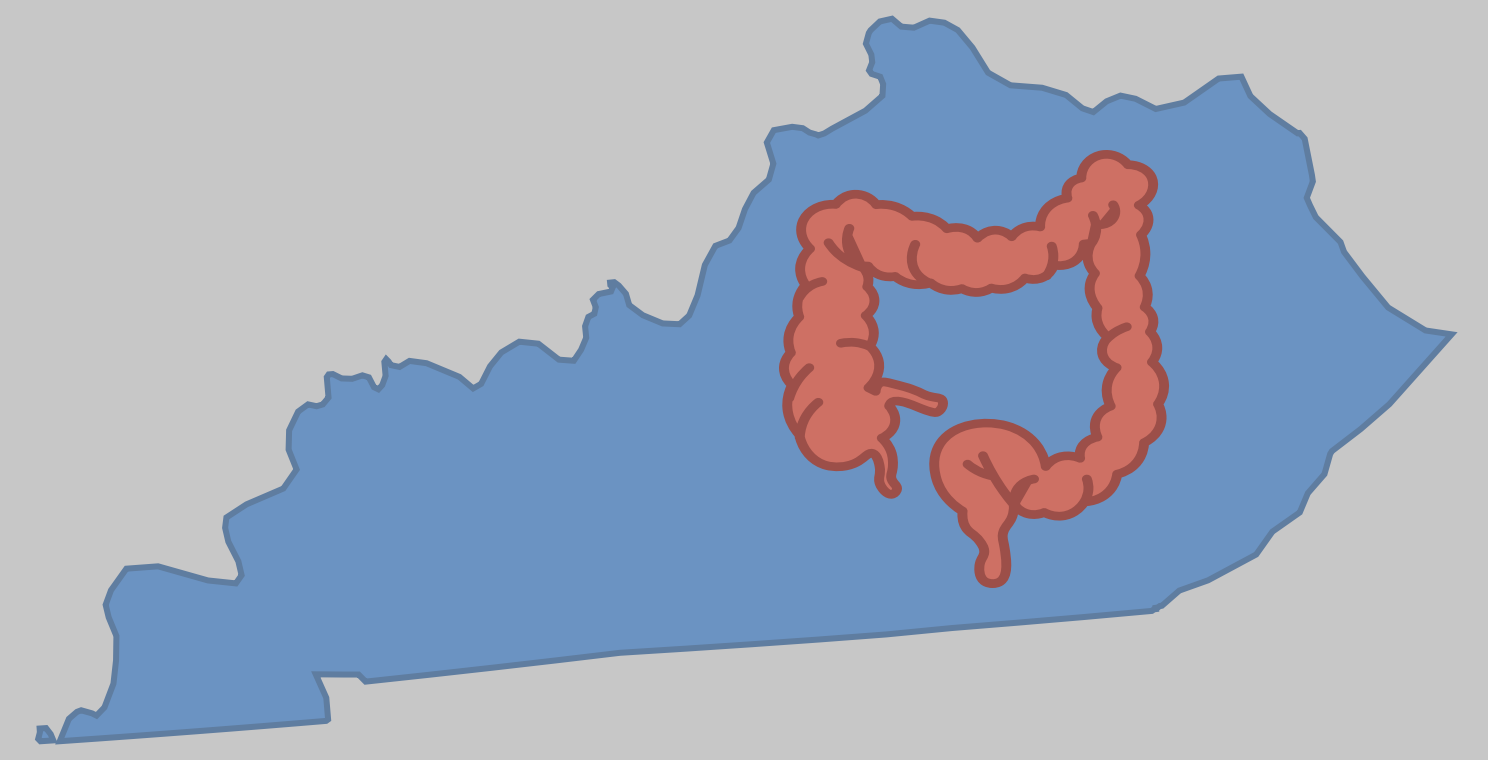
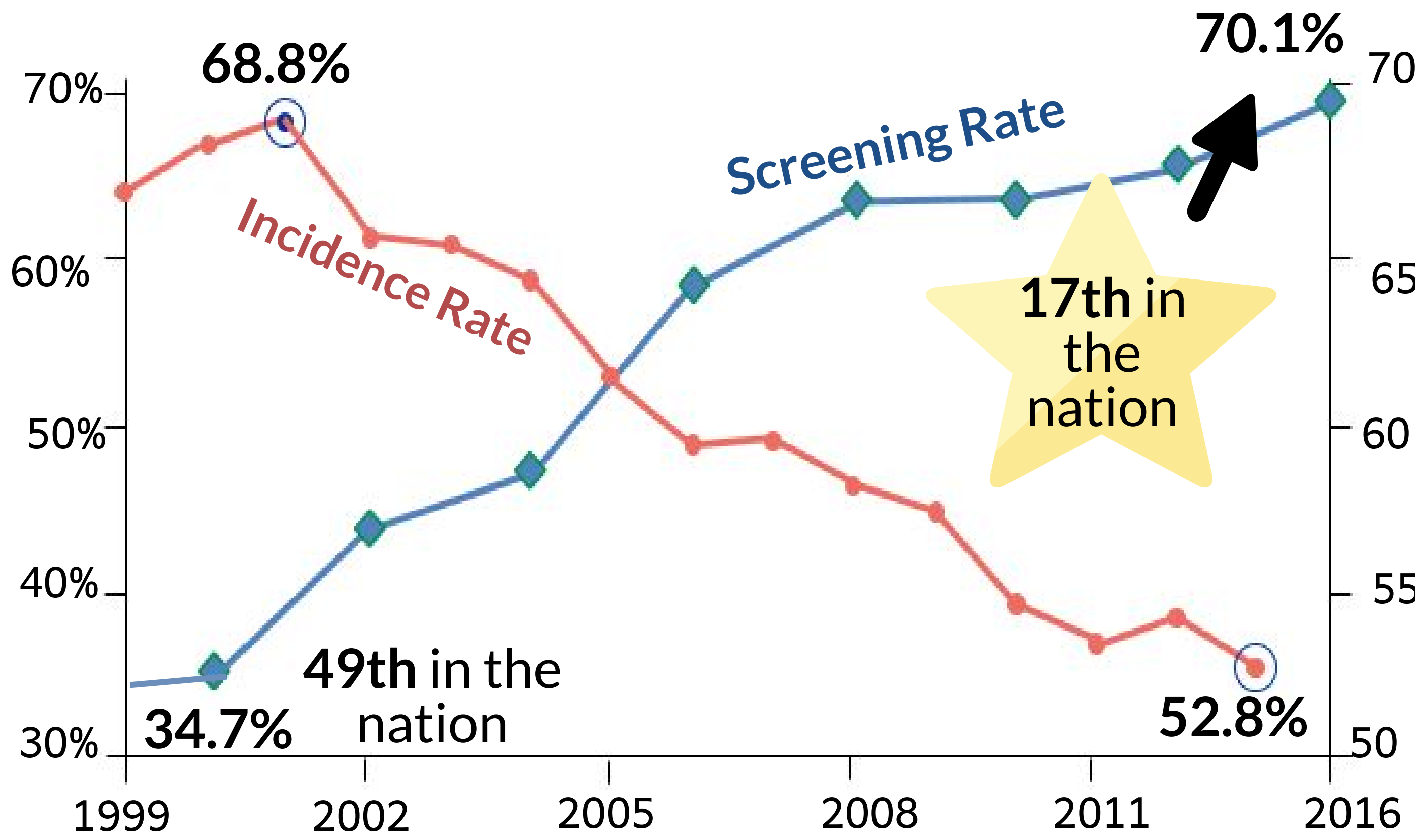


# COLORECTAL CANCER in Kentucky

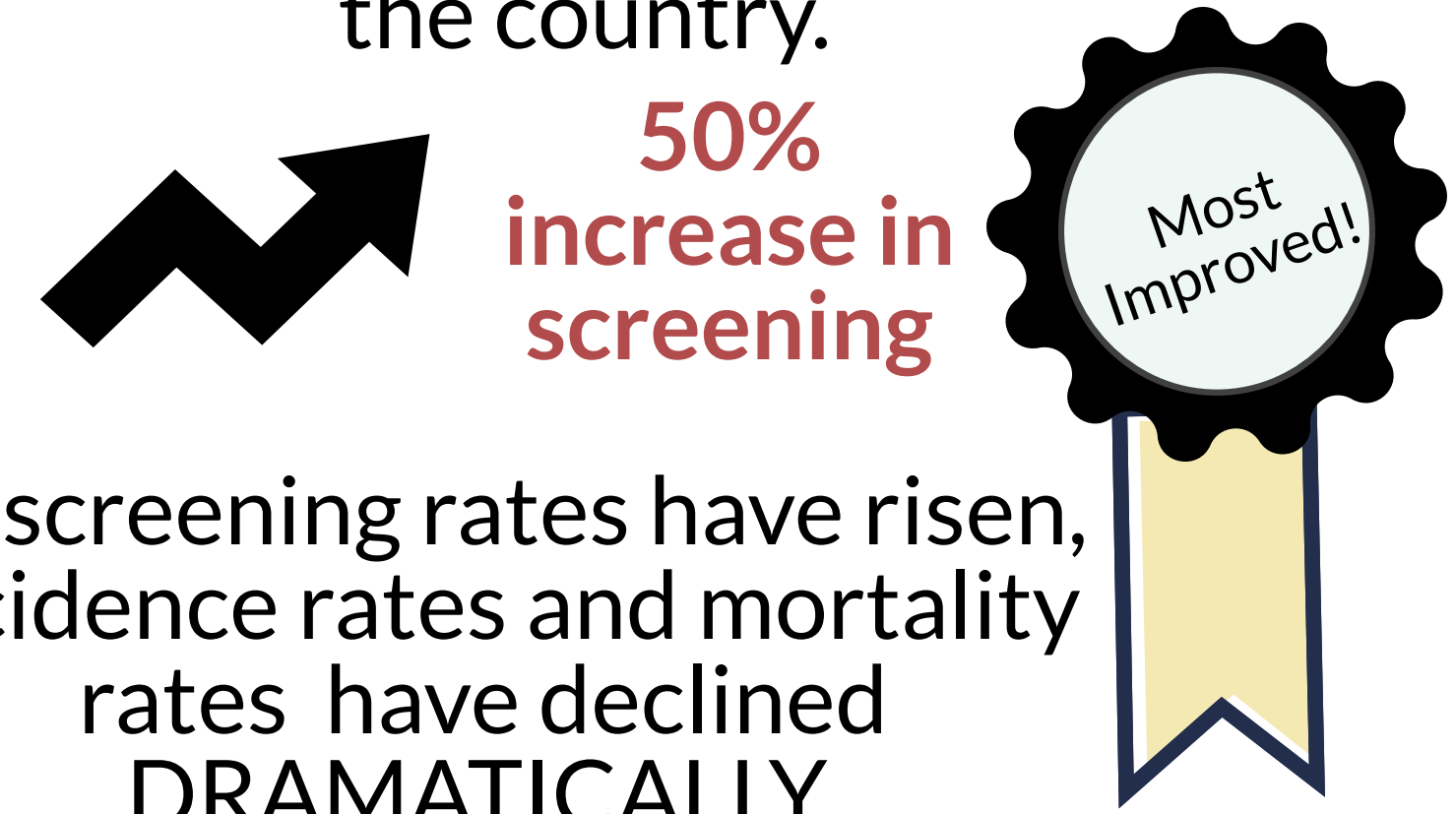


## SCREENING. SAVES. LIVES.

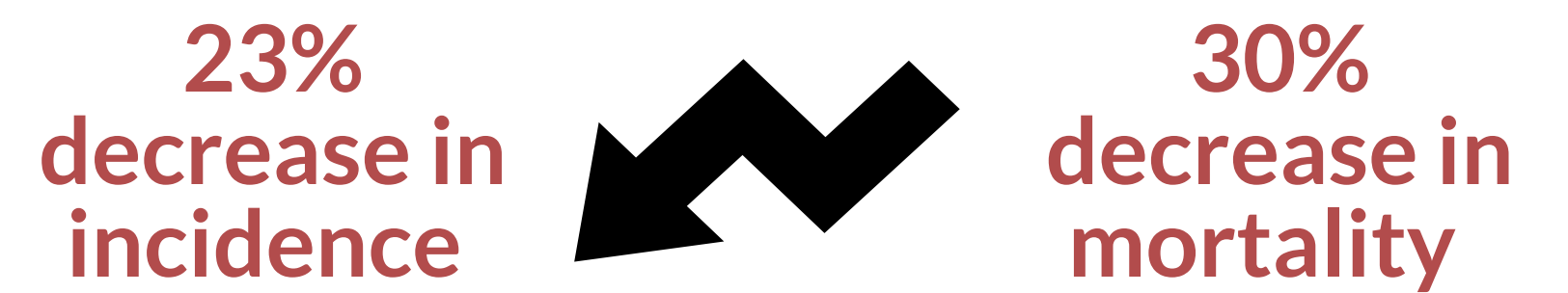


Data source: Kentucky Cancer Registry and KyBRFS. NOTE: The 1999 screening rate is calculated from: "ever had sigmoidoscopy or colonoscopy"; 2016 screening rate calculated from: "fully met USPSTF CRC screening recommendation". Despite survey question and methodology changes in KyBRFS during this time period, it is still clear that Kentucky has made significant improvements in CRC screening..

In the past 17 years, Kentucky's colorectal cancer screening rate has improved more than any other state in the country.



As screening rates have risen, incidence rates and mortality rates have declined **DRAMATICALLY.**



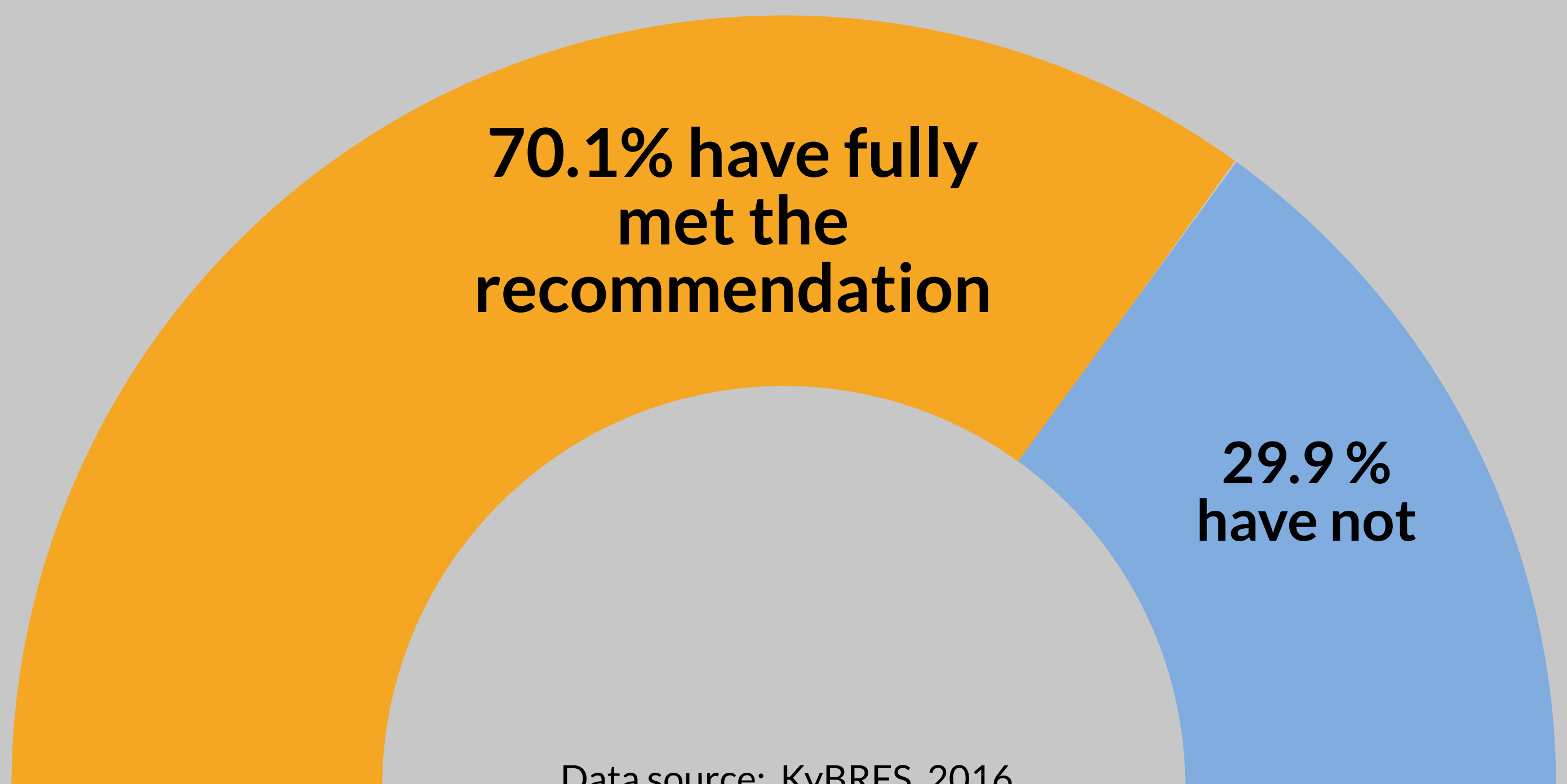
This decrease in incidence means that every year approximately 350 Kentuckians who would have gotten colorectal cancer no longer get the disease.



**Progress!**

**Kentucky is moving forward...**

"Take home" blood stool tests have increased screening options. This chart measures the percentage of Kentuckians aged 50-75 who have fully met the United States Preventive Services Task Force (USPSTF) recommendation for colorectal cancer screening in 2016. "Fully met" is defined as having had a colonoscopy within the past 10 years; or a sigmoidoscopy within the past five years; or a FOBT/FIT within the past one year.



Data source: KyBRFS, 2016

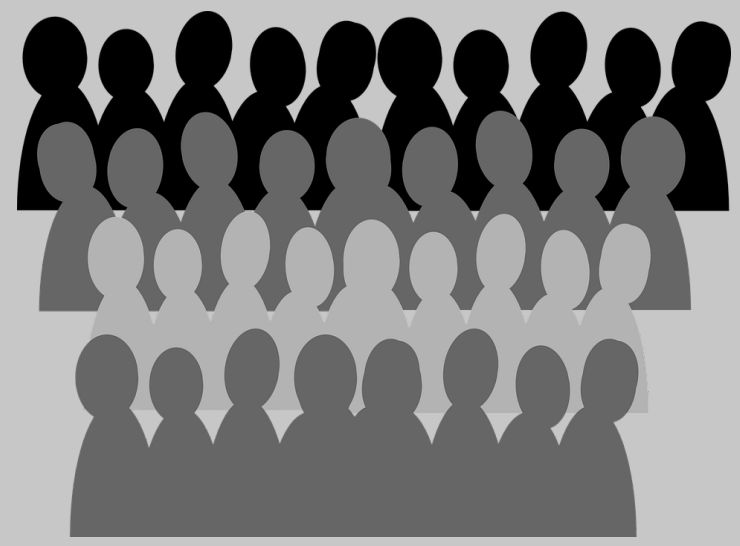
**All 15 Kentucky Area Development Districts have improved cancer screening rates.**

Purchase Area Development District achieved an 83% CRC screening rate in 2016!

Purchase, Barren River, Pennyryle, Kentucky River and Gateway Area Development Districts increased their screening rates by over 30% in the past 10 years!



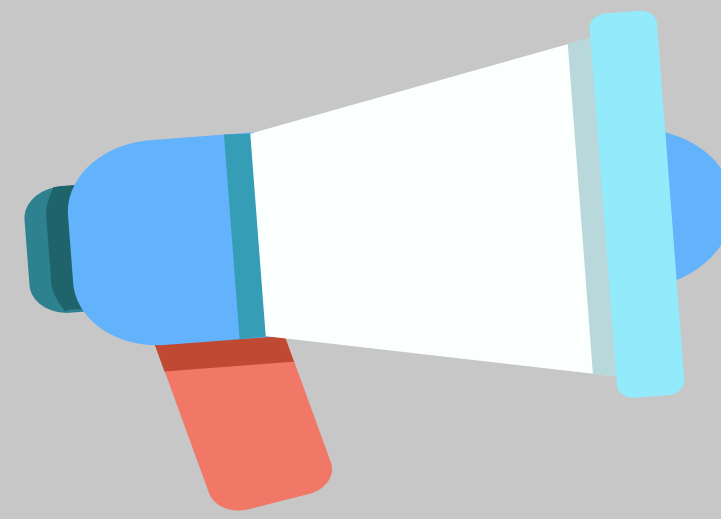
# How did Kentucky make progress?



Long-term cross-sector collaboration



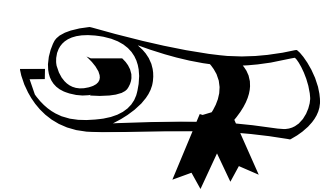
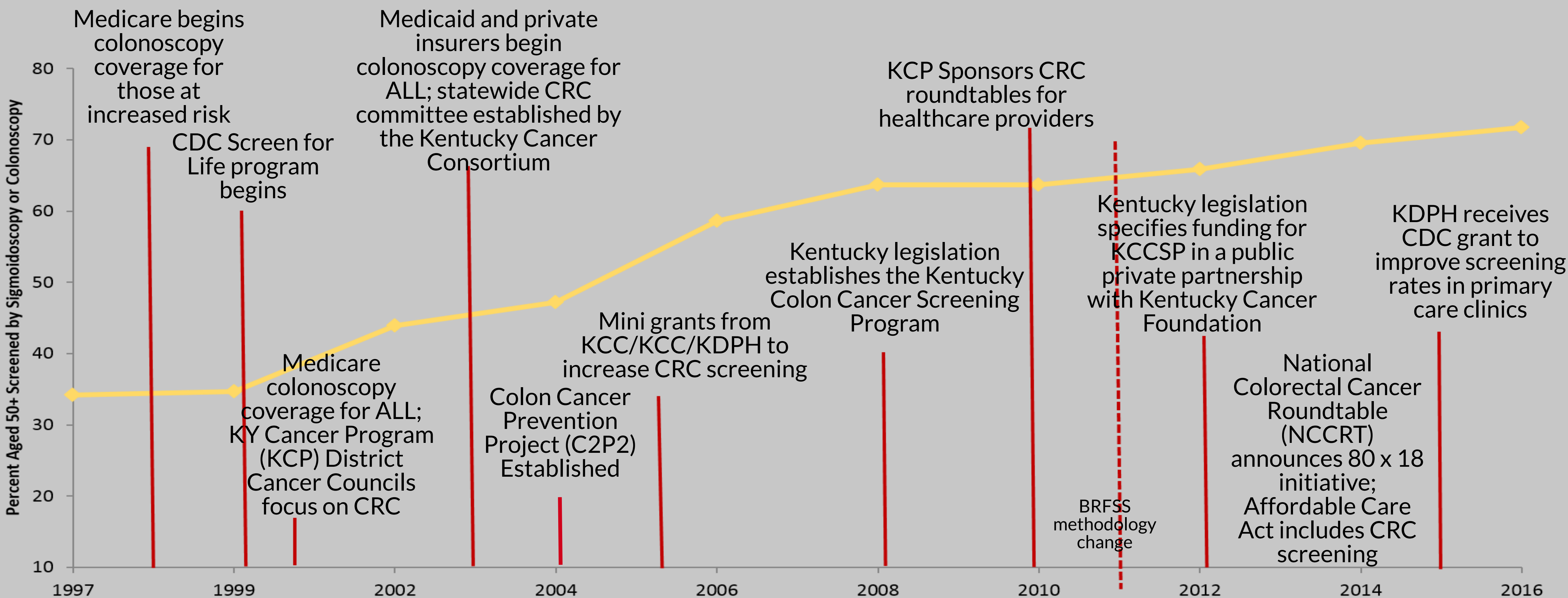
Champions, champions, champions



Coordinated efforts to reach the public, providers and systems with best-practice messaging and interventions



Strong policies that reduce barriers and expand access



## POLICY FACT:

Kentucky was one of the first states in the country to: 1) require almost all health plans to cover the cost of a colonoscopy after a positive FIT or stool DNA test, with no co-pay or deductible; and 2) ensure that a patient who has a polyp found during a screening colonoscopy must continue to be coded and billed as a screening colonoscopy, not a diagnostic colonoscopy. **Correct coding is key to no-cost colonoscopies!**



Local (44.10%) Regional (35.40%) Distant (20.50%)

Data source: Kentucky Cancer Registry, 2009-2013

*There's more to be done!*

Despite our progress, there is more to be done. 21 percent of colorectal cancer cases in Kentucky are still diagnosed at a late stage. Blacks have a higher incidence rate and mortality rate from colorectal cancer than whites. The highest incidence and mortality rates in Kentucky are in the Appalachian region of the state, and they are declining much more slowly compared to the non-Appalachian area of the state.

## WORKING TOGETHER TO ADDRESS COLORECTAL CANCER IN KENTUCKY



The Kentucky Cancer Consortium Colon Cancer Committee is committed to coordinate efforts in colorectal cancer prevention and control, working together to implement objectives in the state's Cancer Action Plan. Visit <http://www.kycancerc.org> to find out how your organization can become involved.

Revised February 2018