Colorectal Cancer Prevention and Detection Initiative

Collaborating Partners: The American Cancer Society (ACS), The Mildred M. Grabda Foundation, Community Health & Social Services Center (CHASS) and Henry Ford Health System (HFHS)

Project description/outcomes: Community Health & Social Services Center (CHASS) with the support of ACS and The Mildred M. Grabda Foundation partnered and launched an initiative in April 2014 to increase rates of colorectal cancer screening (CRC) in patients aged 51-74. The initiative focused on two proven evidence based interventions: alerts with an electronic health record prompting providers to talk with clients presenting for appointments, and outreach to clients about the importance of yearly screens. The goal was to increase the number of colorectal screens by 30% over the previous year. Colorectal Screening rates increased by 43% over the FY 2013 rate. A total of 1028 patients were screened and educated. Patient reminders and Provider reminder/recall system were successfully implemented. If a patient received an abnormal result from FIT kit, they were referred to Henry Ford System (HFHS) for further diagnostic testing. HFHS will then provide all follow up care. A patient navigator assisted them with follow up. CHASS & HFHS worked closely through this process, providing patients guidance in their prefer language. These systems were put in place to increase screening rates; a patient reminder system was created so that patients received a letter in the mail indicating screening test they were due for. If patient did not respond they would receive a phone call as well. A flag was installed as part of the Electronic Medical Record so that the Provider would be notified if patient was eligible for colorectal screening.

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The Michigan Surgical Quality Collaborative (MSQC)
Colorectal Cancer Surgery Initiative

Collaborating Partners: Blue Cross Blue Shield of Michigan/Blue Care Network (BCBSM/BCN), the University of Michigan Health System (UMHS), the National Cancer Institute, The American Society of Colon and Rectal Surgeons and 29 Michigan hospitals.

Project description/outcomes: The Michigan Surgical Quality Collaborative (MSQC) is a statewide organization of 73 hospitals coordinated out of the University of Michigan with support from Blue Cross Blue Shield of Michigan (BCBSM) and Blue Care Network (BCN). Colorectal cancer surgery has become a high-priority focus-area for MSQC because of the large volume of colorectal cancer operations performed statewide, and their variable and high morbidity. Twenty-nine of the 73 participating Michigan hospitals focus on colorectal cancer. PILOT PHASE (November 2013 – May 2014) The pilot phase of this work was twofold. It consisted of: 1) identifying and recruiting steering committee members from hospitals statewide and, 2) identifying and recruiting pilot-site participants who were tasked with collecting cancer surgery-specific variables on a retrospective group of cases. These were cases of patients diagnosed with rectal cancer and had undergone an operation that was previously captured in the MSQC database. LAUNCH PHASE (June 2014 – Current) MSQC opened the Cancer Surgery Initiative to the remaining member hospitals for participation in June 2014. The voluntary collection of colorectal cancer surgery variables was made available via the standard MSQC online data collection platform and 29 hospitals opted to join the initiative. Thirty-four abstractors have now completed the training and case studies, and data collection proceeds without difficulty and continues to be supported by MSQC. This Initiative was created to improve the quality of care for colorectal cancer patients across Michigan.

Research has demonstrated that the quality of cancer care varies in the United States, and our experience is that this is also prevalent in Michigan. There is strong evidence linking the use of evidence-based surgical practices with improved outcomes for colorectal cancer. However, variation in the use of evidence-based practices has been demonstrated---as well as variation in survival, local recurrence, and sphincter preservation. These data suggest opportunities to improve the quality of care.

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Colorectal Cancer Co-Branded Screening Reminder Initiative

Collaborating partners: The American Cancer Society, the Michigan Department of Health and Human Services, Cancer Prevention and Control Section; Blue Cross Blue Shield of Michigan (Blue Cross Complete); HAP Midwest Health Plan, Priority Health (Priority Health Choice), UnitedHealthcare (UnitedHealthcare Community Plan-Michigan); Harbor Health Plan, McLaren Health Plan, Meridian Health Plan of Michigan, Total Health Care and the Upper Peninsula Health Plan.

Project description/outcomes: ACS worked with the nine health plans participating in the Healthy Michigan Plan (HMP) to develop a large postcard with a simple message stating the importance of preventive screening and urging members to talk with their provider about the screening method best for them. The cards were printed in color and had a picture collage of diverse people on the obverse with the message on the reverse. The brands of ACS and the individual health plan were present on both sides of the card. Because CRC screening is not a quality measure under Medicaid, health plans were encouraged to participate by MDHHS utilized funds from the MI Colorectal Cancer Early Detection Program (MCRCEDP) to cover the costs of the printing and postage of the cards for the HMP members. To avoid complications around confidentiality and the lack of claims data to determine who was overdue for their screening – cards were mailed to all age-eligible HMP members. At the time the project was being planned (January 2015) there were approximately 425,000 enrollees in HMP. Individual health plans determined the number of enrolled members age 50-64. The cards were mailed to members by the health plans during the late spring and early summer of 2015. Nine of the thirteen health plans participating in the HMP participated in the initiative including all - save one - of the plans with the highest number of covered lives. Nearly 90,000 reminders were mailed. Since the HMP had a rolling enrollment during 2014 and CRC screening is not a quality measure under Medicaid, base-line data could not be captured. However, health plans have reported anecdotally a strong number of their HMP members have been screened. In addition, some health plans are using the reminder cards for their Medicare and commercial members.

Learn more:
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