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How Will Health Reform Affect States?

Health reform was enacted into law in Washington, DC, but many of the decisions around implementation will be made at the state level. In the coming months and years, states will wrestle with the economic, legal, and clinical aspects of reform; their ability to successfully navigate these issues will have a direct impact on tens of millions of Americans.

A new series of reports, funded by the Robert Wood Johnson Foundation, explores the effect health reform will have on state governments, consumers, the economy, and health care costs.

In the first two papers in the series, Urban Institute researchers look at the many ways health reform will affect states. In addition, the researchers review the evidence on how Massachusetts has responded to state health reform and the recession—and what this means for implementing national reform.

- [“What Is the Impact of the Patient Protection and Affordable Care Act \(PPACA\) on the States?”](#)
- [“What Is the Evidence on Health Reform in Massachusetts and How Might the Lessons from Massachusetts Apply to National Health Reform?”](#)

SAVE THE DATE!



**Hereditary Cancer Syndromes: The Basics
Every Provider Should Know!**

**Friday, November 5, 2010
Lansing, MI**

Additional information and registration materials to follow.

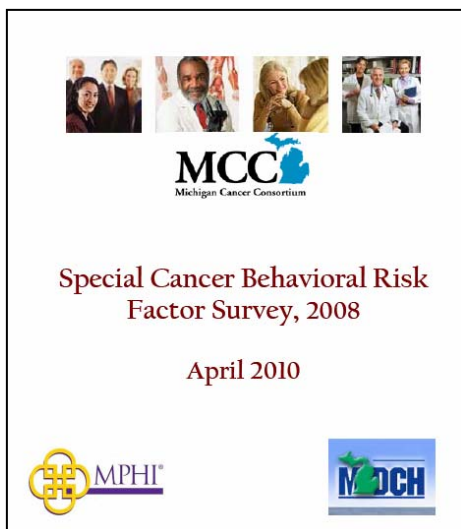
2008 Special Cancer BRFS Now Available

The MCC is pleased to announce that the 2008 Special Cancer Behavioral Risk Factor Survey (SCBRFS) is now available online at

http://www.michigancancer.org/PDFs/MCCReports/SCBRFS_2008-042910.pdf.

The SCBRFS is an ongoing surveillance designed to measure progress towards achieving several priorities of the MCC. The first baseline SCBRFS was conducted in 2001-2002. The SCBRFS was repeated in 2004, 2006, and 2008. Results from subsequent surveys can be compared against baseline data in order to evaluate the progress in cancer-related behaviors and knowledge within the Michigan adult population.

The survey population of the SCBRFS consisted of Michigan men and women aged 40 years and older. This age group experiences the highest incidence and mortality rates for the most common cancer sites that the MCC focuses on. Participation in regular cancer screening is also mostly recommended for this age group.



The 2008 SCBRFS was conducted in a representative sample of the general population which included an over-sampling of African American, American Indian, Hispanic, Arab American, and Asian American residents. Only the 2004 and 2008 surveys over-sampled Asian American residents of the state.

The 2004, 2006, and 2008 surveys targeted individuals 40 years of age or older while the 2001-02 survey included only those 50 years of age or older. For the 2008 survey, a total of 5,631 interviews were completed. The data were collected using telephone surveillance methodology. This methodology closely followed protocols used in the Michigan Behavioral Risk Factor Surveillance System.

Cancer Knowledge, Attitudes, and Screening Practices of African Americans Report Released

A Five City Supplemental Survey to the Special Cancer Behavioral Risk Factor Survey has been released and is posted on the MCC website at:

<http://www.michigancancer.org/PDFs/MCCReports/FiveCitySupplementalSurvey-2008-042910.pdf>.

This survey highlights the cancer knowledge, attitudes, and screening practices of African Americans in five Michigan cities (Detroit, Flint, Lansing, Pontiac, and Saginaw).

The impetus for this study came from the epidemiological finding that although cancer prevalence is roughly equal for African Americans and others, the outcome for African Americans, on average, is worse. It was thought that certain attitudes in the African American community are instrumental in reducing African American participation in screening and treatment, thereby producing the more serious outcomes of the disease.

The African American Five Cities Survey was first conducted in 2003 within five Michigan cities which are residence to approximately 80% of the state African American population. This population-based study provided a baseline assessment of the knowledge, attitudes, and behaviors of African Americans related to cancer in general, cancer screening, cancer prevention, and end of life care.

The findings were intended to inform and aid in the design and implementation of a community intervention to increase the knowledge and awareness about cancer, cancer screening and treatment among the African American population in Michigan. A copy of the report from 2003 can be found at

<http://www.michigancancer.org/PDFs/MCCReports/MCCReports-FiveCitySurvey-100405.pdf>.

The second African American Five Cities Survey was conducted in 2008. This is a supplemental survey to the 2008 Special Cancer Behavioral Risk Factor Survey, a biannual survey designed to measure progress towards achieving several priorities of the MCC among Michigan adult population.

New Online Genomics Products

The Centers for Disease Control and Prevention's Office of Public Health Genomics and its partners are announcing the release of new online products of the Genomic Applications in Practice and Prevention Network (GAPPNet™)

GAPPNet™ Website

The GAPPNet website provides a central place to learn about GAPPNet and new developments in research, policies, and programs on the use of genomic applications to improve health and prevent disease.

The website also provides information about how to get involved in GAPPNet, opportunities for social networking, and an interactive map showing genomic translation projects that are currently in progress in the United States. Additionally, the website provides access to the knowledge base and journal described below. Visit GAPPNet <http://www.gappnet.org>.

The **Genomic Applications in Practice and Prevention Network (GAPPNet™)** aims to accelerate and streamline effective and responsible use of validated and useful genomic knowledge and applications, such as genetic tests, technologies, and family history, into clinical and public health practice. [More about GAPPNet.](#)

Learn about [genomic applications](#).

GAPPNet™ Launches New Products

CDC and its partners announce the formal launch of the GAPPNet Web site, the GAPP Knowledge Base and the *Evidence for Genomic Applications (EGA)* online journal

Genetic Test Registry

NIH solicits comments on a new online genetic test registry

Genetic Testing of Students

Public interest group calls for UC Berkeley to suspend genetic testing plan

GAPPNet™ Site Search

[What's New](#)

[Get Involved](#)

[For GAPPNet Working Groups](#)

[Contact Us](#)

GAPP Knowledge Base (GAPP KB)

GAPP KB is an online resource providing access to information on applications of genomic research for use in public health and health care. GAPP KB features the GAPP Finder, the Evidence Aggregator, Evidence for Genomic Applications (EGA) journal, and links to published evidence reviews and recommendations. These features are works in progress and may be changed over time with input from GAPPNet partners. New features will be added as they are developed. Visit the GAPP KB at <http://www.hugenavigator.net/GAPPKB/home.do>.

State Cancer Profile Update

The Surveillance, Epidemiology, and End Results (SEER) 2007 incidence data are now available in the State Cancer Profiles (SCP) at <http://statecancerprofiles.cancer.gov>.

The National Program of Cancer Registries 2007 incidence data are expected to be added to the SCP in the summer along with mortality data from the National Center for Health Statistics.

NATIONAL CANCER INSTITUTE

State Cancer Profiles

Dynamic views of cancer statistics for prioritizing cancer control efforts in the nation, states, and counties

CDC

The Michigan BioTrust for Health: A Year of Progress

Submitted by the Michigan Cancer Genetics Alliance

The Michigan Department of Community Health (MDCH) introduced the Michigan BioTrust for Health initiative to the Michigan Cancer Consortium (MCC) in the June 2009 MCC Update. Since then, significant progress has been made in establishing the infrastructure needed to make residual dried blood spot samples from newborn screening more useful for medical and public health research.

An integral component of the BioTrust initiative is to ensure residual dried blood spots, stored indefinitely once newborn screening is completed, are utilized in a manner acceptable to the public. A BioTrust Community Values Advisory Board, comprised of representatives from seventeen different organizations, first met on June 1, 2009. The chair of the Biotrust Community Values Advisory Board is Vicki Rakowski, RN, ET, representing the American Cancer Society. Over the past year, the Board has provided guidance to MDCH on policy and procedure development for the BioTrust. A BioTrust Scientific Advisory Board comprised of researchers and clinicians from university and medical centers as well as industry has also been established to ensure all research proposals requesting the use of Michigan's residual dried blood spots have scientific merit, while the MDCH Institutional Review Board reviews each study to assure human subjects protection.



The Michigan Neonatal Biobank, the designated state-of-the-art storage repository for the Michigan BioTrust for Health, has processed and archived over 655,000 of Michigan's current 4 million stored dried blood spots. This is a time-consuming task but work is ongoing to de-identify and code residual dried blood spots prior to their storage.



An important focus over the last year has also been development of a consent process for parents to grant permission to allow their newborn's residual dried blood spots to be made available for health research. This consent process is currently being implemented in an initial phase by 11 of Michigan's 90

birthing hospitals to ensure best practices prior to launching state-wide on October 1, 2010. The consent process helps to ensure that parents are aware of potential research uses and have a choice about whether their child's specimen is used. New educational materials have been developed, including a short video, and MDCH is currently conducting educational outreach to publicize newborn screening and the BioTrust through childbirth education classes and other prenatal settings. Birthing hospital staff is also being trained to help facilitate the consent process and ensure parents make an informed personal choice.

MDCH looks forward to another productive year as the initiative continues to unfold-- a year in which community education will be a primary focus. While there is little national guidance yet on best practices for government sponsored population-based biobanks, it is well known that public support is crucial to their success. MDCH hopes to foster public support by the steps it has taken and will continue to take in the future.

For more information about the BioTrust, please visit www.michigan.gov/biotrust .

Information supports MCC Cancer Genomics Strategic Plan for 2009-2015.



New Dedicated Website for the Michigan Automated Prescription System

The Bureau of Health Professions has launch a new dedicated website for the Michigan Automated Prescription System (MAPS). This new, comprehensive website can be accessed by going to www.michigan.gov/mimapsinfo.

MAPS is the prescription monitoring program for the State of Michigan. Prescription monitoring programs are used to identify and prevent drug diversion at the prescriber, pharmacy, and patient levels by collecting Schedule 2-5 controlled substances prescriptions dispensed by pharmacies and practitioners.

Regardless of whether you are a regular user of MAPS or accessing it for the first time, you will find a wealth of MAPS information including reporting requirements, forms, frequently asked questions, laws and regulations, specific information for health professionals and pharmacies, etc.

As always, please contact the MAPS staff at mapsinfo@michigan.gov if you need assistance. Any comments or suggestions on how the MAPS website could be improved are welcome and can be emailed to mapsinfo@michigan.gov.

Information supports MCC End-of-Life Care Strategic Plan for 2009-2015.

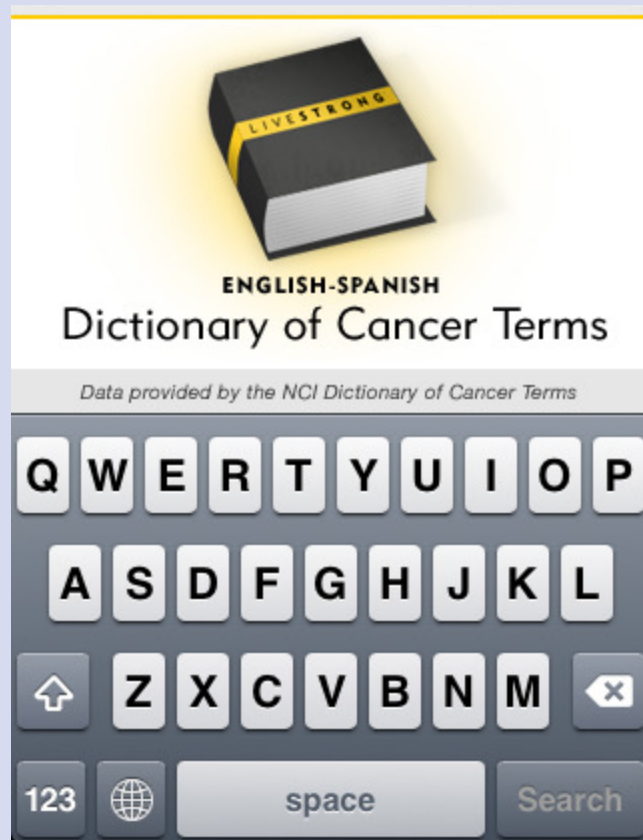
LIVESTRONG Cancer Dictionary iPhone App

Lance Armstrong Foundation has announced a new LIVESTRONG cancer resource for cancer survivors and professionals available for iPhone, iTouch, and iPad users. This application is a cancer dictionary that users can download for free through the iTunes app store.

The application provides users quick and easy access to a cancer dictionary in both English and Spanish. The application is the only cancer dictionary available through iTunes that is both free and from a reputable cancer organization.

The dictionary uses cancer terms and definitions from the National Cancer Institute's Cancer Dictionary and is updated with new terms on a regular basis. LIVESTRONG realizes that these definitions may present users with more questions and concerns and they have included an option at the bottom of each definition where users can contact LIVESTRONG SurvivorCare, a direct one-on-one support program, with one touch. Through this feature, users will have access to Navigation Coordinators to express their concerns and ask questions about the information they read.

You can view images of the app by visiting <http://itunes.apple.com/us/app/livestrong-english-spanish/id375144785?mt=8>



Information supports MCC Cancer Survivorship Special Project for 2009-2011.

July

<i>Sun</i>	<i>Mon</i>	<i>Tue</i>	<i>Wed</i>	<i>Thu</i>	<i>Fri</i>	<i>Sat</i>
				1	2	3
4	5	6	7	8	9	10
11	12	Living With, Through and Beyond Cancer, Part IV – Survivors, Too: Communicating with and Among Family, Friends, and Loved Ones <ul style="list-style-type: none"> • 1:30 – 2:30 pm 	14	Tobacco Use Prevention and Treatment: Impact on Oral Health <ul style="list-style-type: none"> • 12:00 – 1:00 pm 	16	Beating the Drum for Bladder Cancer <ul style="list-style-type: none"> • 5:30 – 11:00 pm • Family Center - Milan
18	19	20	MCC Governance Committee Meeting <ul style="list-style-type: none"> • 7:00 – 8:00 am • Teleconference 	22	23	24
25	26	27	28	29	30	31

2010