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**Quick Links:**

February is [National Cancer Prevention Month](#)

[HPV Update Webinar Feb 23](#)

[Know the Risks](#) (e-cigarettes)

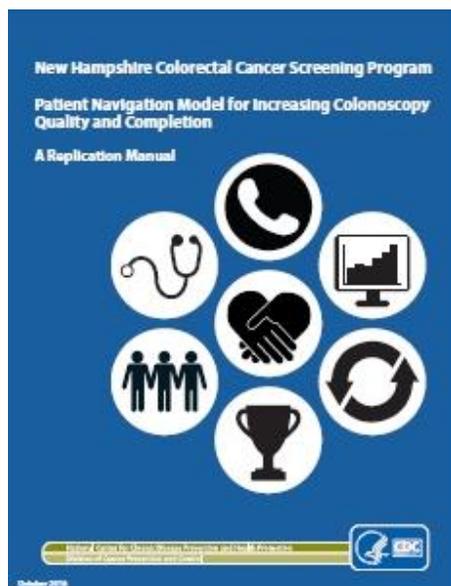
[NCI-designated cancer centers](#) again support HVP vaccination saying the vaccine is cancer prevention

[March is National Colorectal Cancer Awareness Month](#)

[MCC Calendar of Events](#)

**CDC Announces an Effective Patient Navigation Model to Increase Colonoscopy Screening**

The [New Hampshire Colorectal Cancer Screening Program \(NHCRCSPP\)](#) patient navigation model has been highly effective in increasing the completion and quality of colonoscopy screening among underserved groups. Patients in this program were 11 times more likely to complete colonoscopy than a comparison group. Given their success, CDC and the NHCRCSPP worked together to develop a [manual](#) to help others replicate the model. Expanded use of the NHCRCSPP model can help reach our shared goal of 80% colorectal cancer screening by 2018.



*Copyright Statement: The patient navigation model described in this manual was created by the New Hampshire Colorectal Cancer Screening Program (NHCRCSPP) and developed through CDC grant number 5U58DP002053. It is copyright protected and not intended for commercial use or publication in part or in whole by any other parties without express written consent by NHCRCSPP. The manual was developed by NHCRCSPP and CDC and its dissemination is intended for use in public health.*



## A Large, Prospective Analysis of the Reasons Patients Do Not Pursue BRCA Genetic Testing Following Genetic Counseling

**Large, Prospective Analysis of the Reasons Patients Do Not Pursue BRCA Genetic Testing Following Genetic Counseling** Hayden, S., Mange, S., Duquette, D. et al. *J Genet Counsel* (2017).  
doi:10.1007/s10897-016-0064-5  
<http://link.springer.com/article/10.1007/s10897-016-0064-5>.

### **Abstract:**

Genetic counseling (GC) and genetic testing (GT) identifies high-risk individuals who benefit from enhanced medical management. Not all individuals undergo GT following GC and understanding the reasons why can impact clinical efficiency, reduce GT costs through appropriate identification of high-risk individuals, and demonstrate the value of pre-GT GC. A collaborative project sponsored by the Michigan Department of Health and Human Services prospectively collects anonymous data on BRCA-related GC visits performed by providers in Michigan, including demographics, patient/family cancer history, GT results, and reasons for declining GT. From 2008 to 2012, 10,726 patients underwent GC; 3476 (32.4%) did not pursue GT. Primary reasons included: not the best test candidate (28.1%), not clinically indicated (23.3%), and insurance/out of pocket cost concerns (13.6%). Patient disinterest was the primary reason for declining in 17.1%. Insurance/out of pocket cost concerns were the primary reason for not testing in 13.4% of untested individuals with private insurance. Among untested individuals with breast and/or ovarian cancer, 22.5% reported insurance/out of pocket cost concerns as the primary reason for not testing and 6.6% failed to meet Medicare criteria. In a five-year time period, nearly one-third of patients who underwent BRCA GC did not pursue GT. GT was not indicated in almost half of patients. Insurance/out of pocket cost concerns continue to be barriers.

## 500 Cities: Local Data for Better Health

In 2015, The Robert Wood Johnson Foundation and CDC Foundation launched the 500 Cities Project in partnership with the Centers for Disease Control and Prevention. The project's purpose was to identify, analyze, and report city and census tract-level data, obtained using small area estimation methods, for 27 chronic disease measures for the 500 largest American cities.

Although limited data are available at the county and metropolitan levels, this project represents a first-of-its kind data analysis to release information on a large scale for cities and for small areas within cities. This system complements existing surveillance data necessary to more fully understand the health issues affecting the residents of that city or census tract.

These high-quality, small-area epidemiologic data can be used both by individual cities and groups of cities as well as other stakeholders to help develop and implement effective and targeted prevention activities; identify emerging health problems; and establish and monitor key health objectives. For example, city planners and elected officials may want to use this data to target neighborhoods with high rates of smoking or other health risk behaviors for effective interventions.

There are 16 Michigan cities in the [500 Cities project](#). Once on the website, you can view Michigan city map books by going to "Download Maps for All Measures by City."



## American Cancer Society Cancer Action Network (ACS CAN) Update

Submitted by Andrew Schepers, Michigan Government Relations

The lame duck legislative session between the holidays was a busy time as it left only three weeks to complete priority legislation. ACS CAN, along with other partners, ramped up its activities around oral chemotherapy fairness.

The major hang up in the House of Representatives with oral chemotherapy fairness was the concern expressed by the health plans and business advocates – that by providing fairness, premiums would increase so much that people would not be able to afford health coverage and businesses would not be able to afford providing coverage for their employees. The only way to provide protections for patients would be to provide price transparency on oral chemotherapy drugs. This was the message shared by members of the House that were not in favor of the legislation with their colleagues so that they could use it as they were approached by their constituents.

One way to provide protections for the health plans is that if they can show that their premiums increased more than 2% over the year due to them providing oral fairness (and due to no other factors), they could opt-out of providing fairness. This is similar to the mechanism in place in Ohio and health plans have never been able to reach that 2% mark in increased premiums due to oral fairness. ACS CAN feels this could provide protections and still provide fairness for patients, a win-win. However, House members didn't support this, leaving the bill dead for the term.

Oral fairness is an issue that will be returning in the 99<sup>th</sup> legislature due to the personal interest of sponsor Senator Goeff Hansen. ACS CAN will be working on this issue in the coming term along with creating a statewide commission for palliative care, increasing Michigan's tobacco taxes, providing access to fresh fruits and vegetables to underserved areas and more to come. ACS CAN is looking forward to 2017 and working with partners to help finally push these issues across the finish line.



## Many Breast Cancer Survivors Don't Get Life-Extending Therapy

Hormonal therapies such as tamoxifen, or a class of drugs called aromatase inhibitors, can reduce the likelihood that women diagnosed with certain breast cancers will experience a recurrence of their disease. However, a [new study](#) finds these treatments -- used in breast cancers that are responsive to hormones such as estrogen -- are too seldom utilized or often used incorrectly. According to the research team, if all U.S. breast cancer survivors who needed them followed recommendations for hormone therapy, that could mean almost 15,000 lives saved over a decade. Unfortunately, these drugs are "still underused, and in some cases, misused -- offered to patients who lack [estrogen] hormone receptors" on their tumor cells, explained study senior author Dr. Dezheng Huo. He's associate professor of public health sciences at the University of Chicago. Source: *HealthDay*, February 2, 2017

## CDC's Division of Cancer Prevention and Control (DCPC) Announces New Resource: Policies and Practices for Cancer Prevention and Survivorship: Physical Activity

DCPC's Scientific Support and Clinical Translation Team (SSCT) developed and released a new resource with information and best practices addressing the role of physical activity in cancer prevention and survivorship.



[Download your copy.](#)



### Reminder!

These are the 2016 Award Recipients – **Champion** and **Inspiration**

The award process will soon be announced for 2017 – who will you nominate?

### 2017 MCC Meetings

#### **Save-the-Dates**

**Board Meetings (12 pm – 3 pm):**

Wed, Mar 29

Wed, June 28

Wed, Sept 27

**Annual Meeting (Lansing):**

Wed, Nov 8

**For more information: 877-588-6224.**

### MCC Website

Be sure to visit the [MCC website](#) to find provider and patient resources