August 6, 2021

2022 Child and Adult Core Set Annual Review
Stakeholder Workgroup Members
1100 First Street, NE, 12th Floor
Washington, DC 20002-4221

RE: 2022 Core Set Review Public Comment

Dear Child and Adult Core Set Annual Review Stakeholder Workgroup,

On behalf of Cancer Early Detection Alliance, CEDA, we respectfully submit comments for consideration to CMS regarding the 2022 CMS Adult Core Set of Quality Measures for Medicaid.

CEDA
CEDA consists of national organizations representing a diversity of stakeholders, including patient advocacy organizations, healthcare professional societies, and industry leaders. CEDA’s mission is to promote and expand access to quality, equitable early cancer detection and care, with a specific focus on reaching underserved communities and addressing racial and ethnic disparities. To this end, we seek to engage patients, providers, and other allies to promote legislation and regulation for the early detection of cancer, remove barriers to cancer care, and support and advance targeted and meaningful funding opportunities geared toward early detection.

Adding Colorectal Cancer Screening to Adult Core Set of Quality Measures
CEDA encourages CMS to accept the recommendation by the CMS voting members to add colorectal cancer screening to the CMS Adult Core Set of Quality Measures for Medicaid patients beginning in 2022.

Colorectal cancer is the second leading cause of cancer deaths for men and women combined.¹ Currently, the CMS Adult Core Set of Health Care Quality Measures has metrics for both breast and cervical cancer screening, colorectal cancer causes more deaths than both of these cancers. Men make up 46% of the Medicaid population, however, no cancer screening measure applies to males in the Medicaid Adult Core Set.

In addition to benefitting all genders, colorectal cancer screening is critical to advancing health equity, achieving the directive issued by President Biden on January 20, 2021, in the Executive Order (EO) “On Advancing Racial Equity and Support for Underserved Communities Through the Federal Government”

(Executive Order on Racial Equity). The EO directed all areas of the federal government to pursue a comprehensive approach to advancing equity for all, including people of color and others who have been historically underserved, marginalized, and adversely affected by persistent poverty and inequality. Colorectal cancer screening impacts people of color, who are disproportionately impacted by colorectal cancer through access and quality of care issues. Non-elderly Medicaid patients are racially and ethnically diverse with 84.8% being people of color compared to 25.2% being people of color in the Medicare population (US average, 2019).²

Furthermore, in January 2021 the President issued an EO “On strengthening Medicaid and Affordable Care Act” which directs federal agencies to make high quality healthcare accessible to every American. Medicaid covers 9,452,003 patients between the ages 46 to 64, the age recommended for screening for colorectal screening, representing about 14% of the total Medicaid population.³ Furthermore, enrollment in Medicaid increased over the past year by 10.9% in 36 states because of COVID-19. Among the Medicaid population an unexpected rise of 1% in colorectal cancer occurred in the age group 50-64, according to 2012-2016 data, this is in sharp contrast to a 3.3% decline in colorectal cancer incidence rates for those 65 or older. As highlighted in the EO, the growing Medicaid population deserves access high quality health care, including colorectal screening that will help reduce morbidity and mortality, highlighting the importance of establishing a colorectal quality metric.

Encourage Consideration of Adding Other Cancer Screening Metrics in the Future

The current CMS Adult Core Set Performance Measures includes breast and cervical cancer screening, and soon we hope colorectal cancer. In the future we would like to see other cancer screening quality measures included. Quality measures for cancer screening improve cancer screening rates. We know that early detection identifies cancer when it is most treatable and therefore is critical to increasing survival rates and improving outcomes for cancer patients. Detecting an individual’s cancer early in the disease course can help patients and their providers develop a treatment plan sooner, which can help prevent or delay the spread of cancer. For these reasons we encourage the future consideration of adding cancer screening quality measures for all routine cancer screenings to the Child and Adult Core Set Performance Measures.

Thank you for the opportunity to provide comments regarding the 2022 CMS Adult Core Set of Quality Measures for Medicaid. CEDA strongly supports the addition of colorectal cancer screening to the CMS Adult Core Set of Quality Measures and looks forward to working with you in the future for identifying and adding additional early cancer screening quality metrics. Please contact Peggy Tighe at Peggy.Tighe@PowersLaw.com or Taryn Couture at taryn.couture@powerslaw.com if you have any questions about the information provided here

Respectfully,

CEDA

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² The Kaiser Family Foundation State Health Facts.; 2019. https://www.kff.org/medicaid/state-indicator/medicaid-distribution-nonelderly-by-raceethnicity/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D

³ Center for Medicaid and CHIP Services D of Q and HO. Medicaid and CHIP Beneficiary Profile.; 2020.