## COLORECTAL CANCER CONTROL PROGRAM FY 2023 APPROPRIATIONS FACT SHEET CENTERS FOR DISEASE CONTROL AND PREVENTION

FY 2021	FY 2022	FY 2023 President's Budget	FY 2023 Request
\$43,294,000	\$43,294,000	\$48,294,000	\$70,000,000

Colorectal cancer (CRC) is the second leading cause of cancer deaths in the United States (U.S.) for men and women. Every year, about 140,000 Americans are diagnosed with CRC, and more than 50,000 people die from it. Colorectal cancer screening is a recommended clinical preventive service that not only detects cancer early when treatment is more effective, but also can prevent cancer by removing pre-cancerous polyps. The percentage of U.S. adults aged 50 to 75 years with up-to-date CRC screening was 68.8% in 2018, an increase of 1.4% from 2016. National CRC screening rates have remained relatively level since 2010 after steadily increasing over the previous decade. Through the Colorectal Cancer Control Program (CRCCP), CDC is working to address the issue by providing funding to 35 grantees (19 States, the District of Columbia, eight universities, two tribal organizations, and five other healthcare organizations) to increase CRC screening rates among men and women aged 50 to 75 years. Funding the program at \$70 million would allow CDC to expand the program nationwide to all 50 states – and increase the use of life-saving cancer screening among unscreened adults.

## **Basic Facts about Colorectal Cancer:**

- Among cancers affecting both men and women, colorectal cancer is the second leading cause of cancer-related deaths in the U.S. In 2019, 51,896 people in the United States died of colorectal cancer (27,674 men and 24,222 women).
- One quarter of U.S. residents (25.7%), or 22 million aged 50-75 years, have never been screened for CRC. Among the never-screened, 85% are insured and 82.3% are aged 50 to 64 years.
- Estimated direct medical costs for colorectal cancer care in 2010 were \$14 billion, with projected costs of up to \$20 billion by 2020.

## **CDC's Colorectal Cancer Screening Program**

In FY 2015, CDC awarded new five-year funding to 30 grantees to focus on implementing health systems changes designed to increase CRC screening rates. Funding is used by grantees to partner with health systems and clinics that serve low-income, high-need populations to implement evidence-based interventions (provider assessment/feedback, provider reminders, reducing structural barriers) and other strategies (patient navigation, small media) proven to increase screening. Currently grantees are working with more than 830 clinics in 261 health systems and more than 6,300 providers that serve 1.3 million patients aged 50 - 75. Most of the clinics are Federally Qualified Health Centers who have high percentages of uninsured or underserved patients. Grantees report baseline and annual screening rates for all clinics, allowing CDC to assess the impact of the CRCCP. After year 4 of the program, the average clinic screening rate had increased 8.2% for clinics that participated for two years, while those that participated for four years increased their screening rate by 12.3%.

For more information, visit: https://www.cdc.gov/cancer/colorectal/

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