**COLORECTAL CANCER CONTROL PROGRAM**

**FY 2024 FACT SHEET**

**Background**

Colorectal cancer (CRC) is the second leading cause of cancer deaths in the United States for men and women. Every year, about 151,030 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 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 71.6% in 2020, an increase of 2.8% from 2018. 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 provides funding to 35 grantees (20 States, 8 Universities, 2 Tribal Organizations, and 5 other healthcare organizations) to increase CRC screening rates among men and women aged 50 to 75 years. **Additional funding 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 United States. In 2022, 52,580 people in the United States died of colorectal cancer.
* Twenty percent of US residents aged 50-75 years have never been screened for CRC. Among those who have never been 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 and rose to $24.3 billion in 2020.

**CDC’s Colorectal Cancer Screening Program**

The CDC currently provides funding to 35 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, client reminders, reducing structural barriers) and other strategies (patient navigation, small media) proven to increase screening. Currently grantees are working with over 830 clinics in 261 health systems and over 6,300 providers that serve 1.3 million patients aged 50-75. Most clinics are Federally Qualified Health Centers that 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 which participated for 2 years while those that participated for 4 years increased their screening rate by 12.3%.