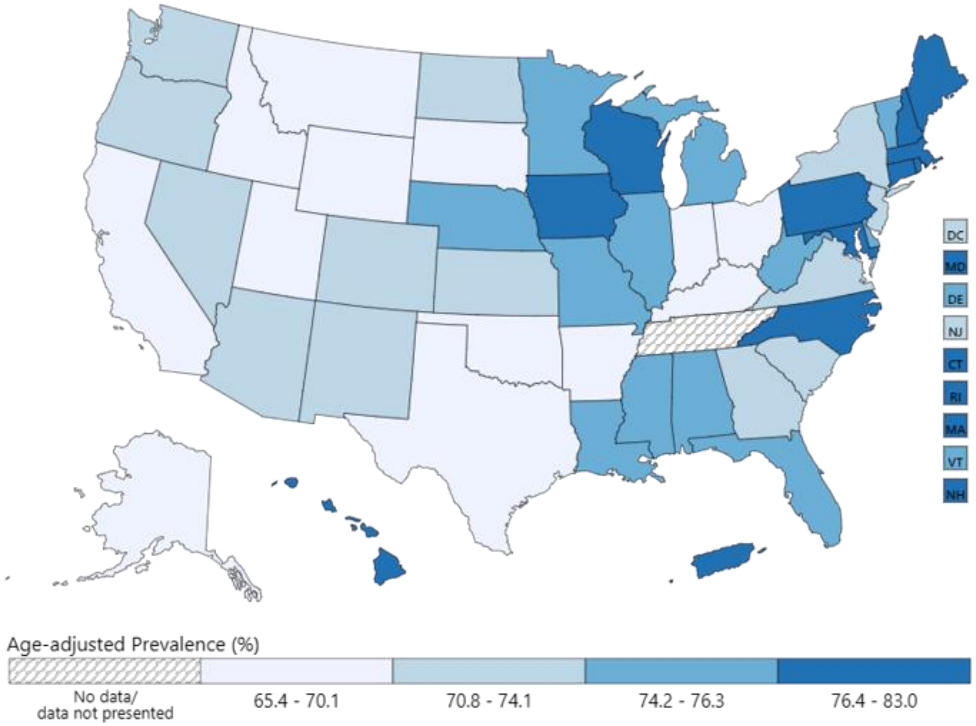
NBCCEDP Business Meeting 2026

Where We Are Now and Where We Want To Go

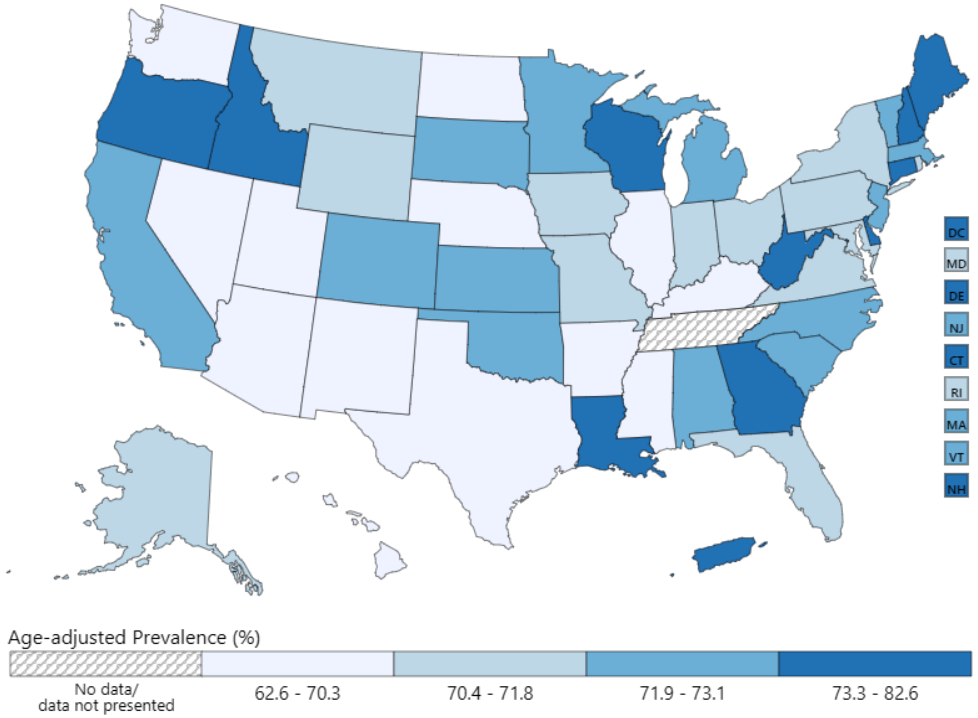


CAPT Jacqueline Miller, MD
Acting Division Director
Division of Cancer Prevention and Control
National Center for Chronic Disease Prevention and Health Promotion
August 18, 2026

Up-to-Date Screening Varies Across the United States, BRFSS 2024



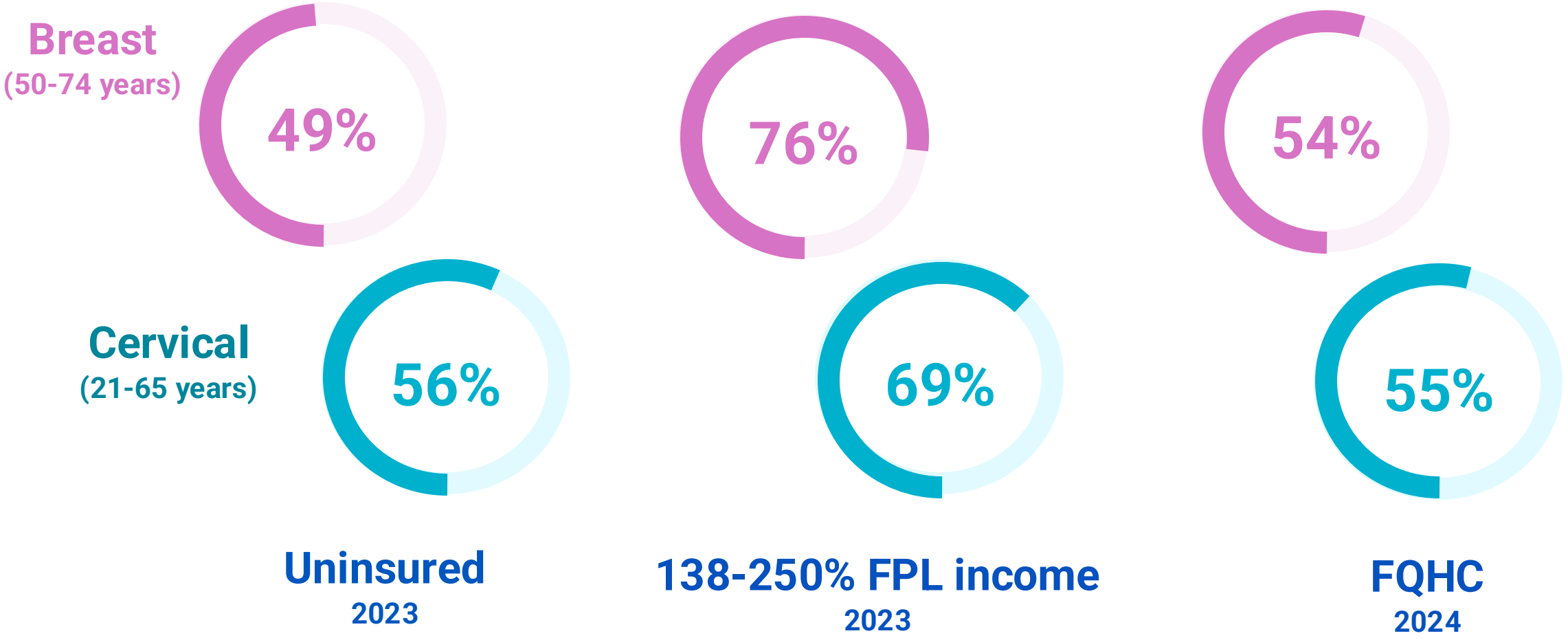
Mammography among 50-74 year olds



Cervical cancer screening among 21-65 year olds

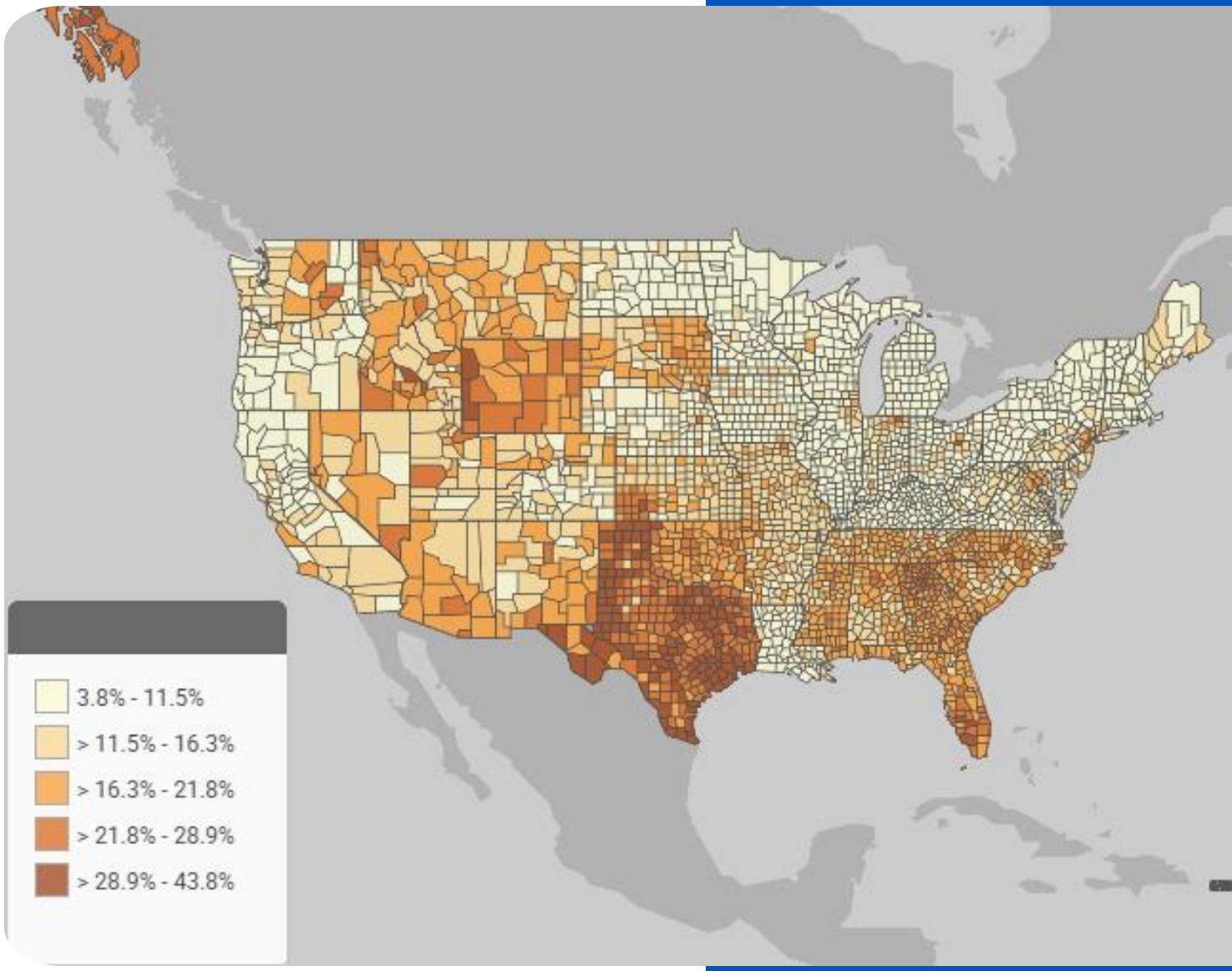
Sources: U.S. Cancer Statistics Working Group. https://www.cdc.gov/cancer/dataviz, released in June 2026.

Opportunities to Increase Screening



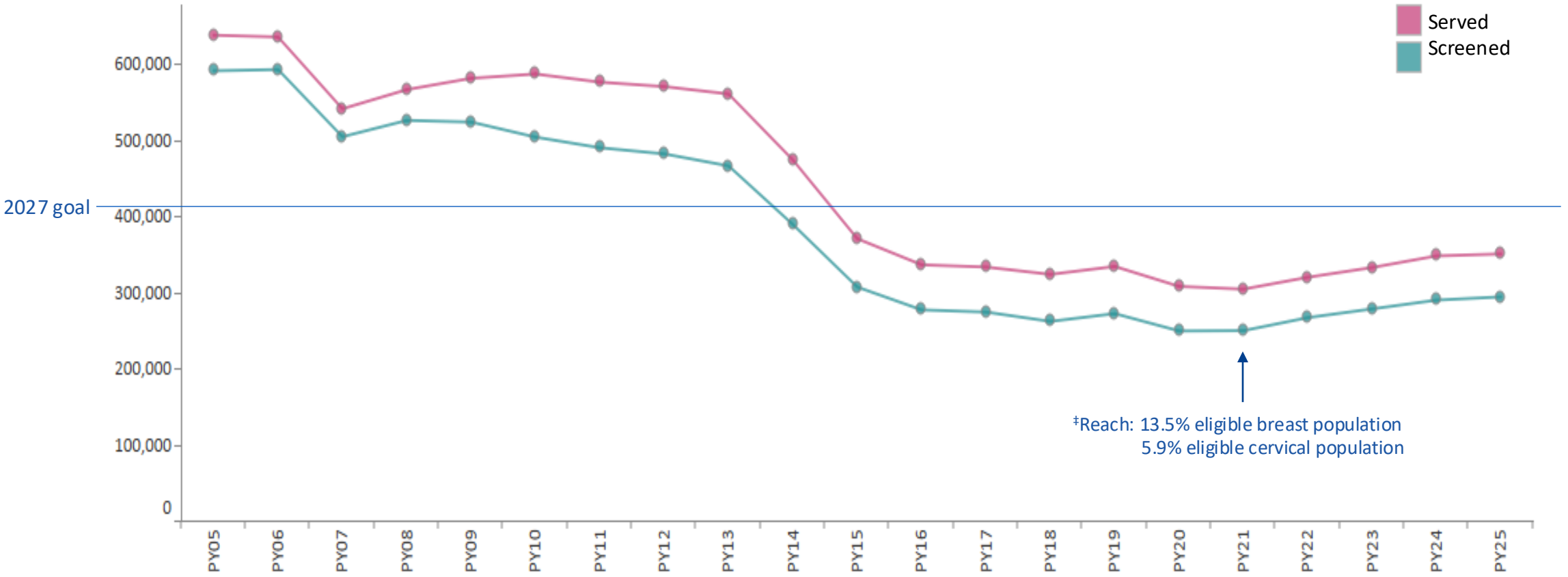
FPL = Federal Poverty Level; FQHC = Federally Qualified Health Centers
Sources: NHIS data for uninsured and income from Sabatino et al. Prev Chronic Dis 2025. HRSA Unified Data System for FQHC.

2023 Female Population who are Uninsured, Aged 21-64 years, with income ≤250% Federal Poverty Level



Source: Census Small Area Health Insurance Estimate.

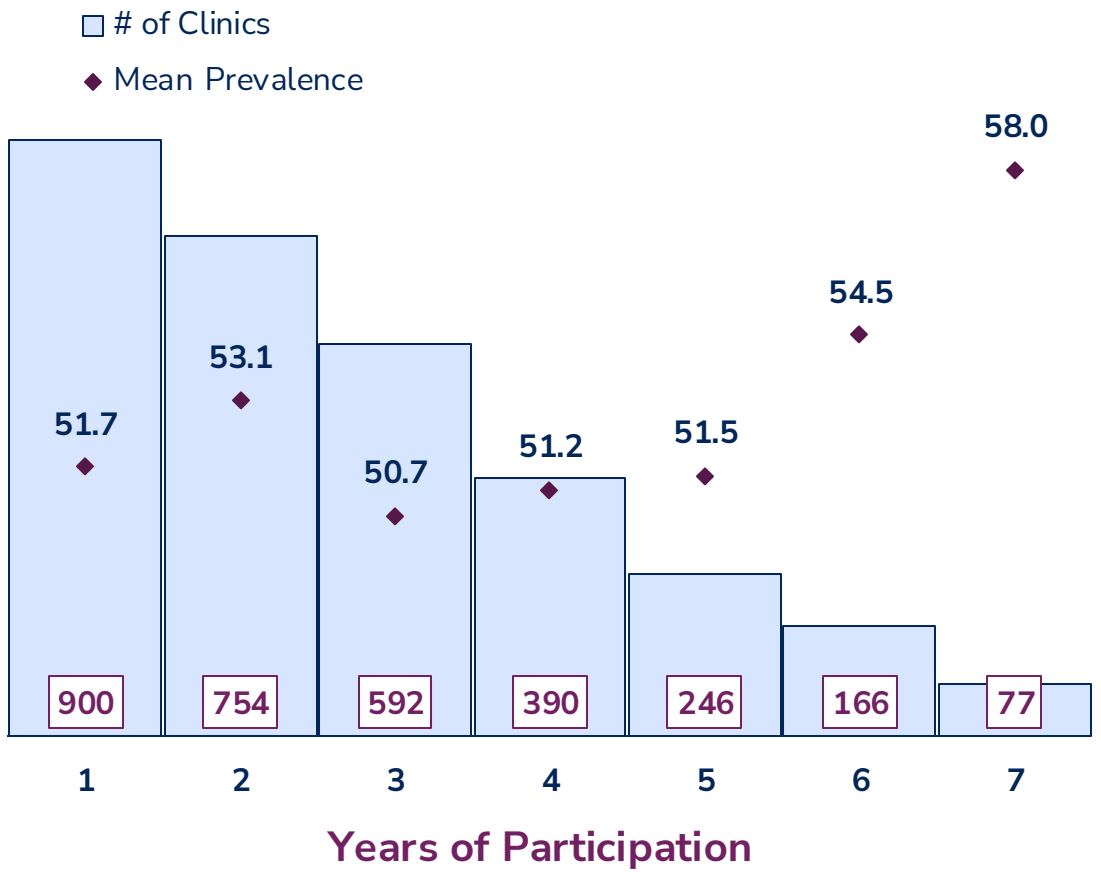
Number of Women Served* and Screened in the NBCCEDP by Program Year (PY)†



Source: October 2025 NBCCEDP data submission.
*Served includes those screened and those who were screened elsewhere then entered the program for diagnostic services.
†Program Year (PY) is defined as July 1 through June 30, therefore PY25 represents July 1, 2025–June 30, 2026.
‡Tangka, et al. Cancer Causes Control 2025; 36, 531–538.

Breast Cancer Screening Prevalence by Time in Program

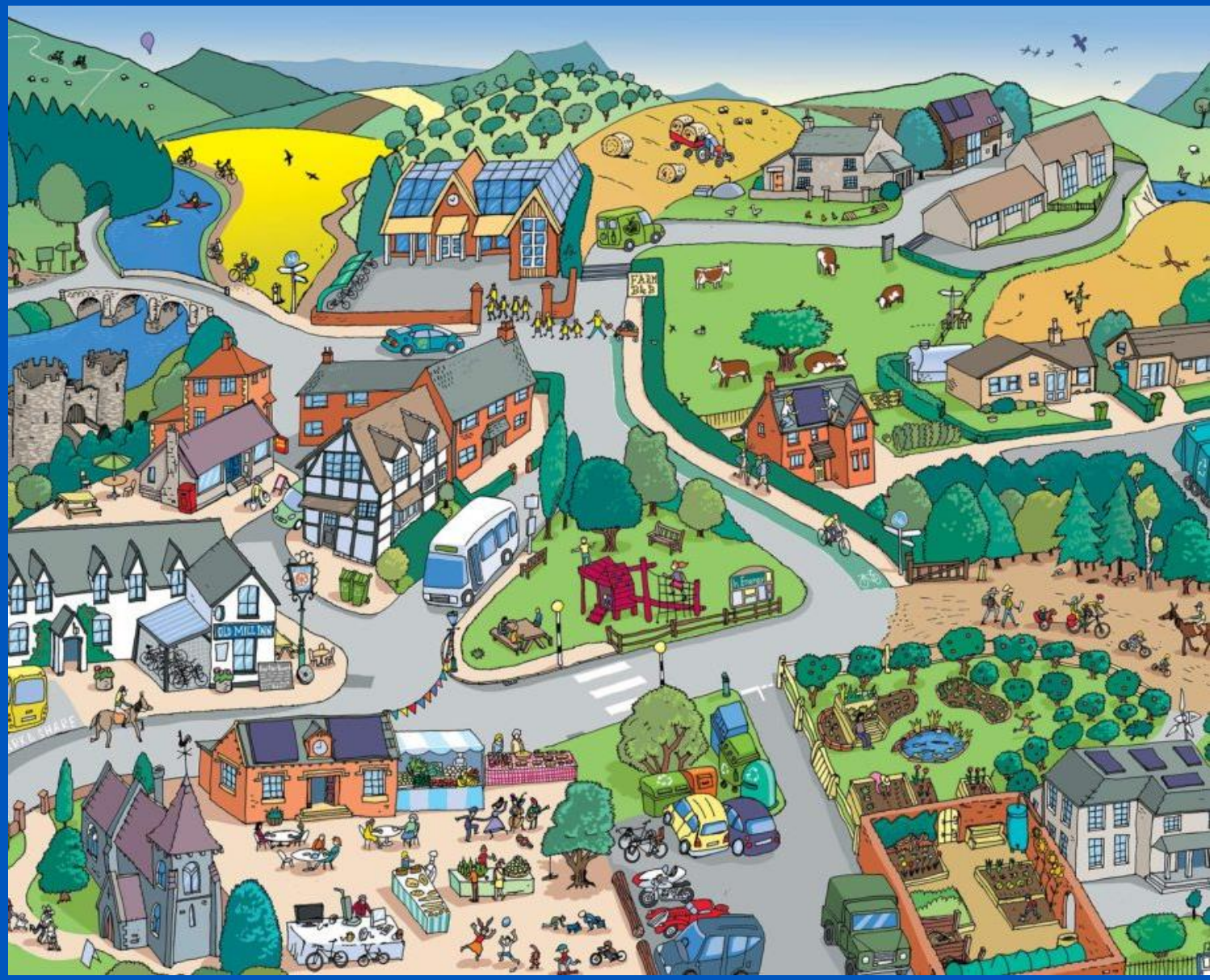
- Screening prevalence is the mean percent of women age 50-74 years up to date with breast cancer screening.
- Clinics' screening prevalence increases the longer the clinic is in the program.
- Average number of years in program is 4.



Source: NBCCEDP clinic data submission, Sep 2025.
Includes all clinics recruited in DP17-1701, Program Years 1-5 and DP22-2202, Program Years 1-2. Clinics may come in and out during this period of time.

Meet People Where They Are

- Bring opportunities to the people in their community
- Utilize other settings like worksites and pharmacies
- Speak plain language
- Use language translations
- Expand telehealth
- Improve use of digital technology

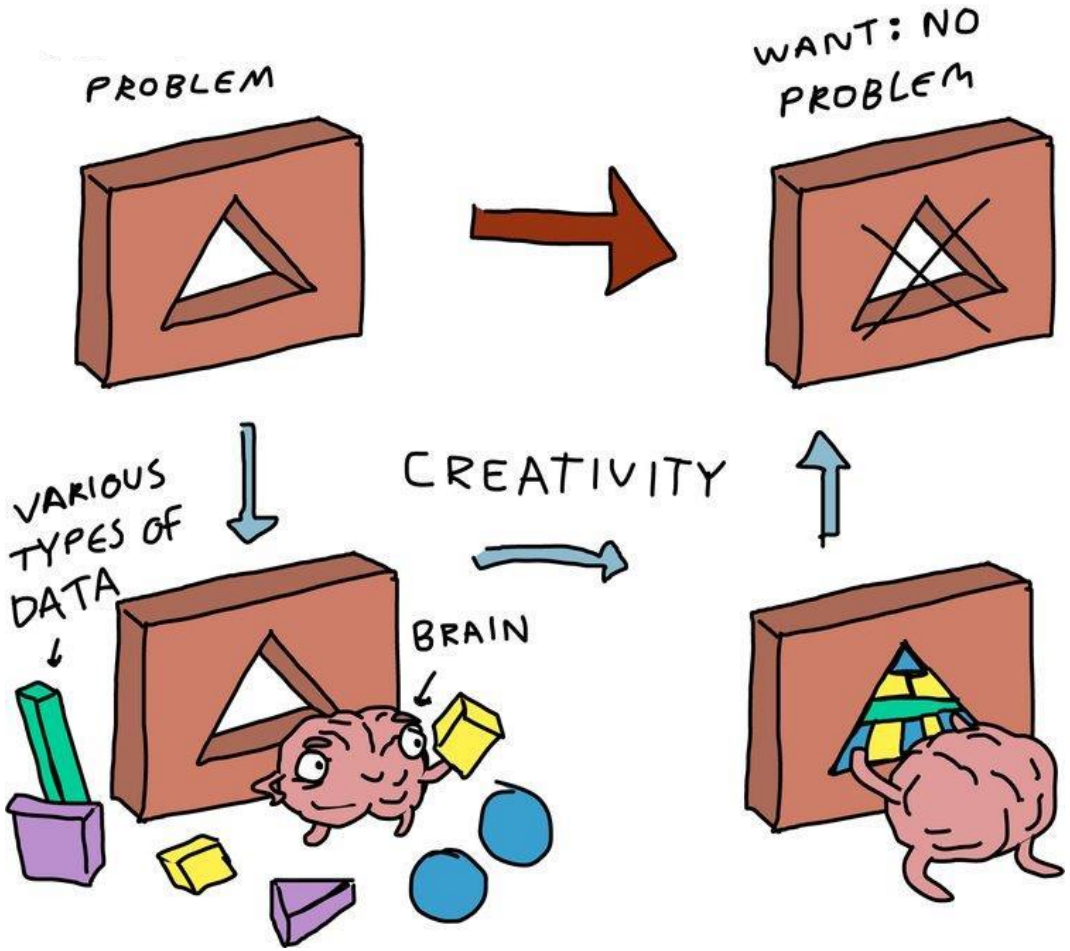


Address Social Factors



Source: Miller et al. MMWR 2024; 73: 351-357.

No One Perfect Solution



Be Creative!

- The solution may vary by community.
- Think about who you are serving.
- Assess the context of the community.

Thank you!

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 https://www.cdc.gov/
Follow us on social **@CDCgov**

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the U. S. Centers for Disease Control and Prevention.

NBCCEDP Evaluation

Key Findings and Insights for Year 5

Dara Schlueter, MPH

PSB Program Evaluation Team

Meet the Program Evaluation Team

CDC Program Services Branch



Dara Schlueter
Team Lead



Michele Beckman
Epidemiologist



Kristy Kenney
Health Scientist



Stephanie Melillo
Health Scientist



Andrea Torres
Health Scientist

Meet the Data Contractors

Information Management Services (IMS)



Bill Helsel
Project Manager



Bill Kammerer
Project Manager

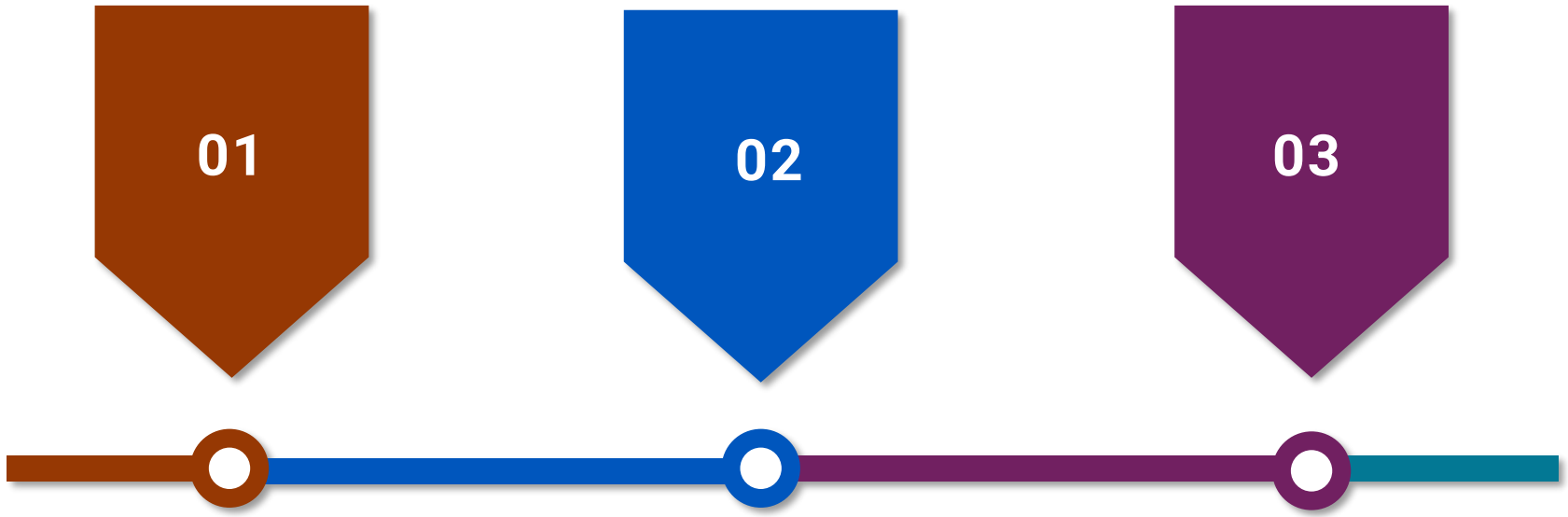
Technical Consultants

Suzanne Adams
Denise Hitchcock
Brandon Horbal
Christina Mauro
Rebecca Myers
Anamika Satsangi
Megan Savage
Amy Sheu
Jesia Trent

Computer Systems Team

Rick Firth
Tanner Rockwell
William Short
Vivian Liu

Why is program evaluation important?



INFORM
future program planning and decision making

IMPROVE
recipient programs and CDC support

STRENGTHEN
accountability between recipients, CDC and partners



Navigating the Ups and Downs



How NBCCEDP partners support program implementation and screening

Supporting partners' activities have remained consistent



Conduct outreach and
connect program-eligible individuals to screening



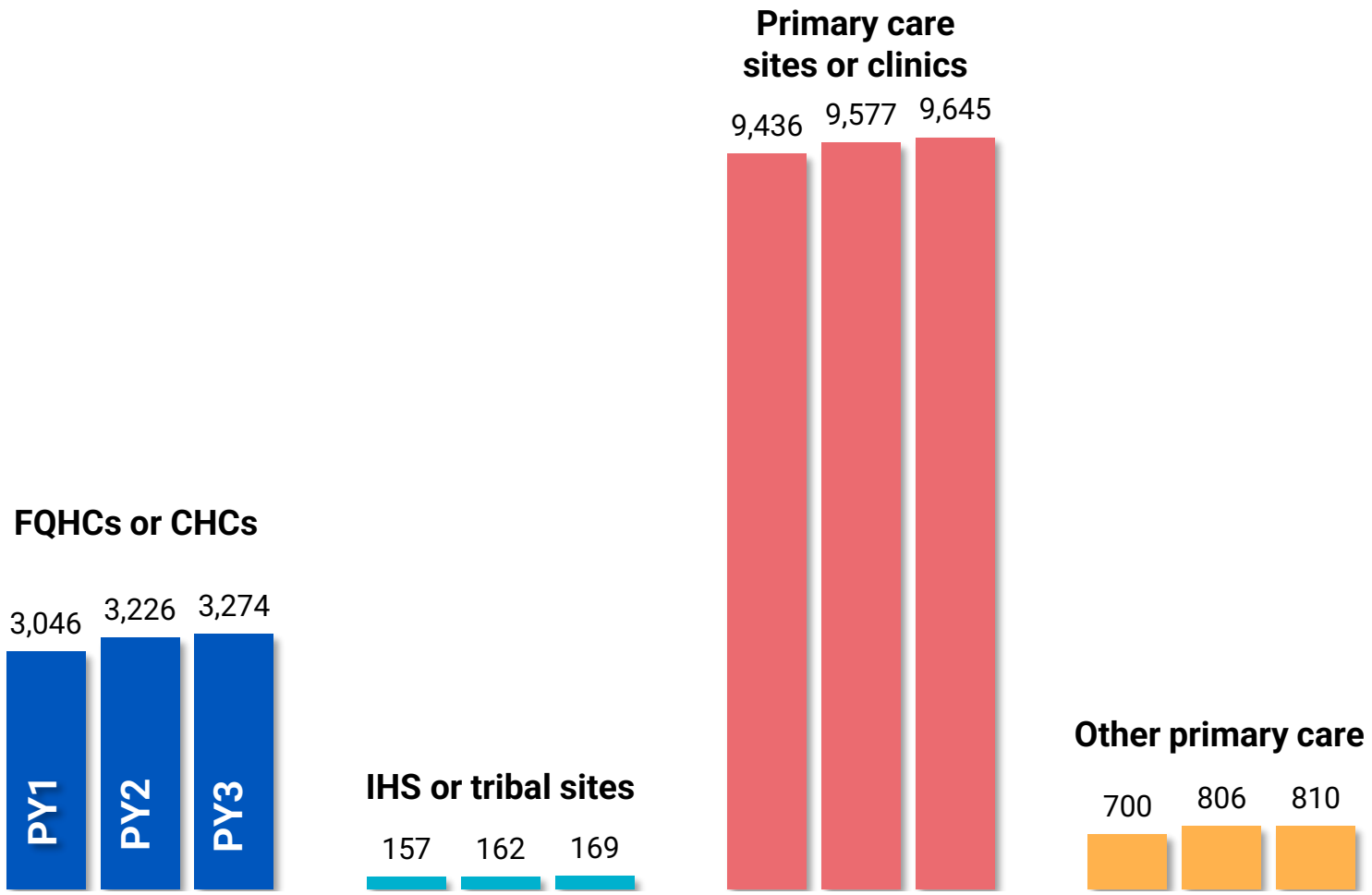
Connect individuals to
needed health/community/social services



Conduct outreach and
connect specific populations of focus to screening

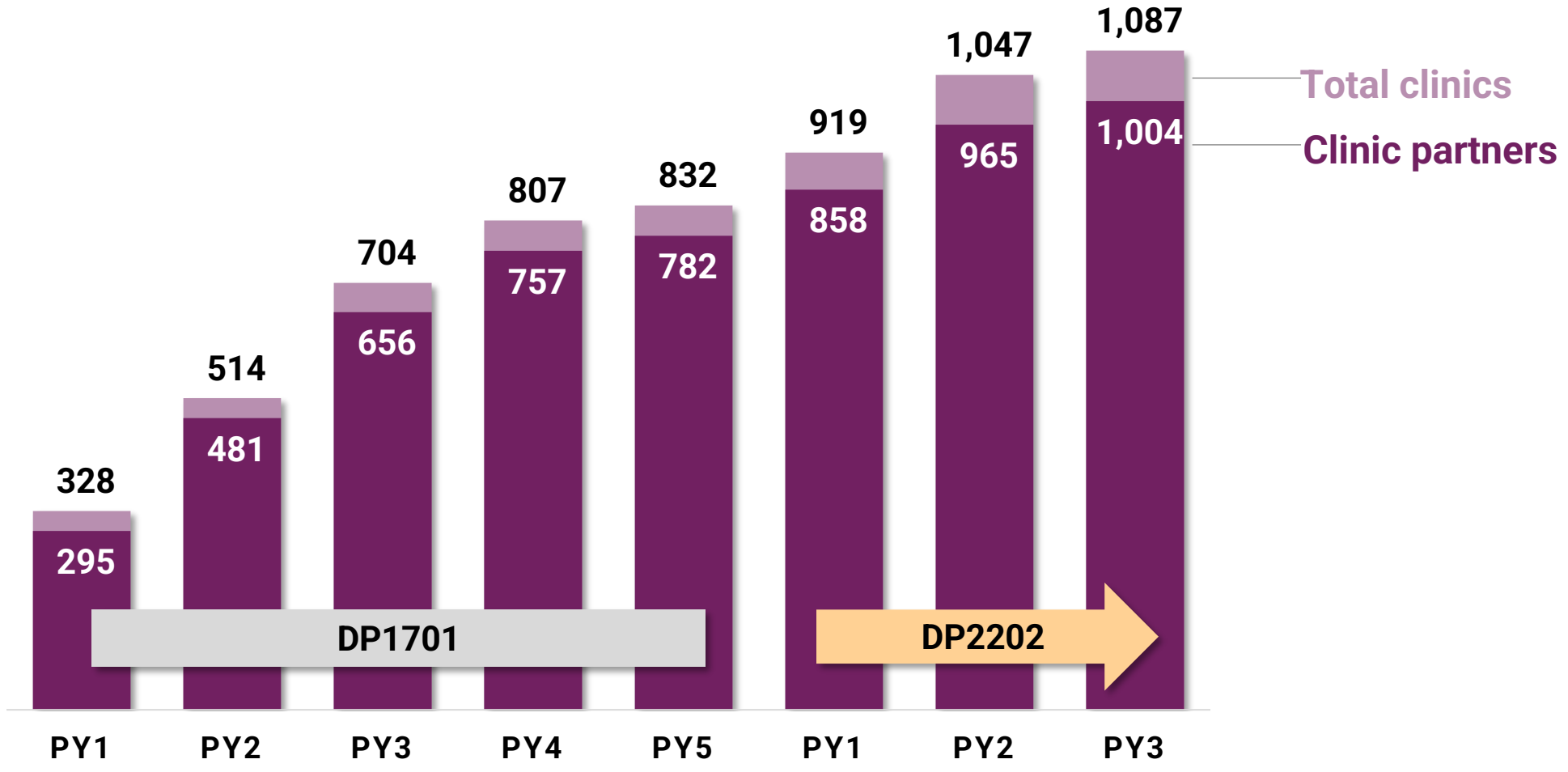
Source: NBCCEDP annual recipient survey
Includes all survey submissions DP22-2202, Program Years 1-3

Screening happens most often in **primary care sites,** followed by **FQHCs/CHCs**



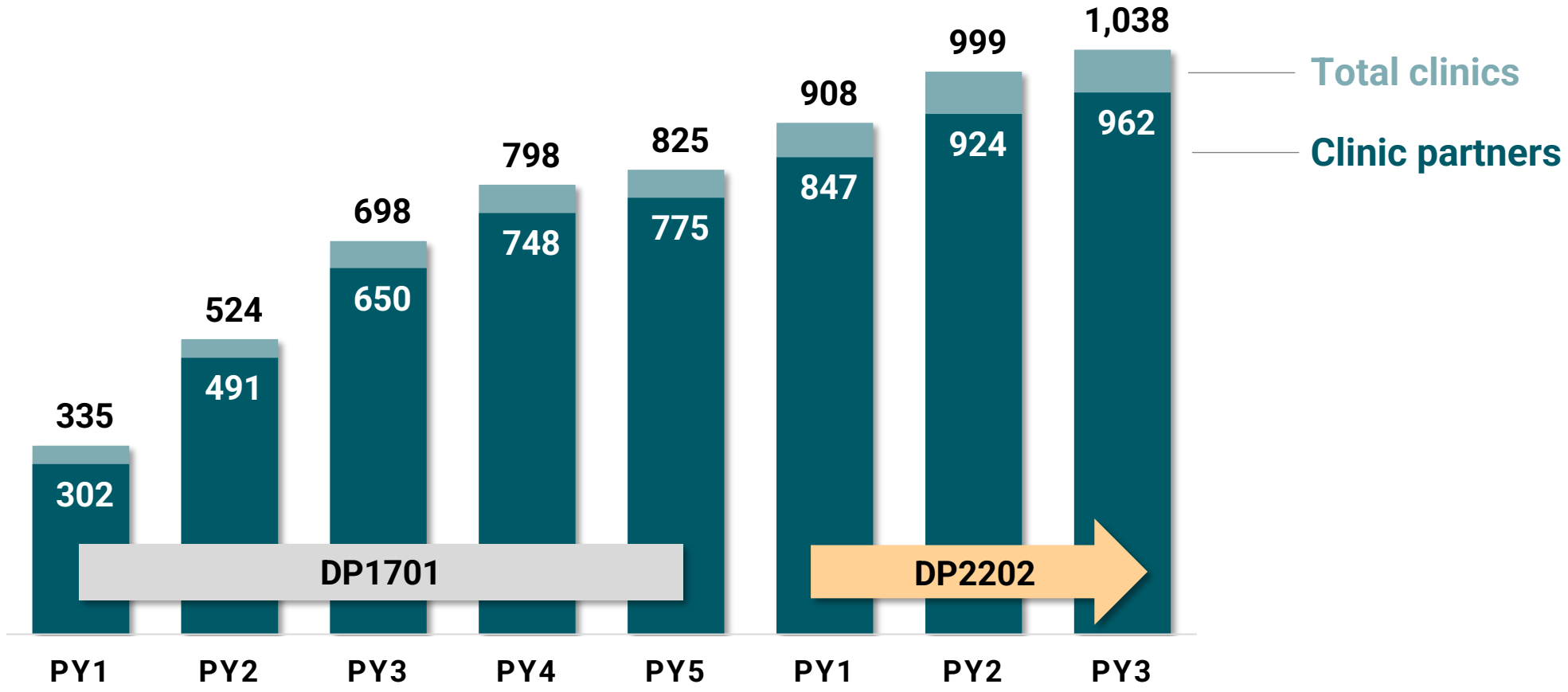
Source: NBCCEDP annual recipient survey
Includes all survey submissions DP22-2202, PY 1-3

Enrollment of breast clinic partners to implement EBIs has **consistently increased** since the start of DP1701



Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP1701, PY1-5 and DP2202, PY1-3.

The **enrollment of cervical clinic partners** to implement EBIs has **consistently increased** since the start of DP1701



Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP1701, PY1-5 and DP2202, PY1-3.

Characteristics of Breast Clinics Reached

1,004 clinic partners reached from 2017 - 2025

71%
Federally-Qualified Health Centers

n = 708

30%
High percentage of uninsured patients (>20%)

n = 306

47.9%
Average baseline screening prevalence

35%
Non-metropolitan location

n = 355

Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP1701, PY1-5 and DP2202, PY1-3.

Characteristics of Cervical Clinics Reached

962 clinic partners reached from 2017 - 2025

70%
Federally-Qualified Health Centers

n = 671

43%
High percentage of uninsured patients (>20%)

n = 415

50.9%
Average baseline screening prevalence

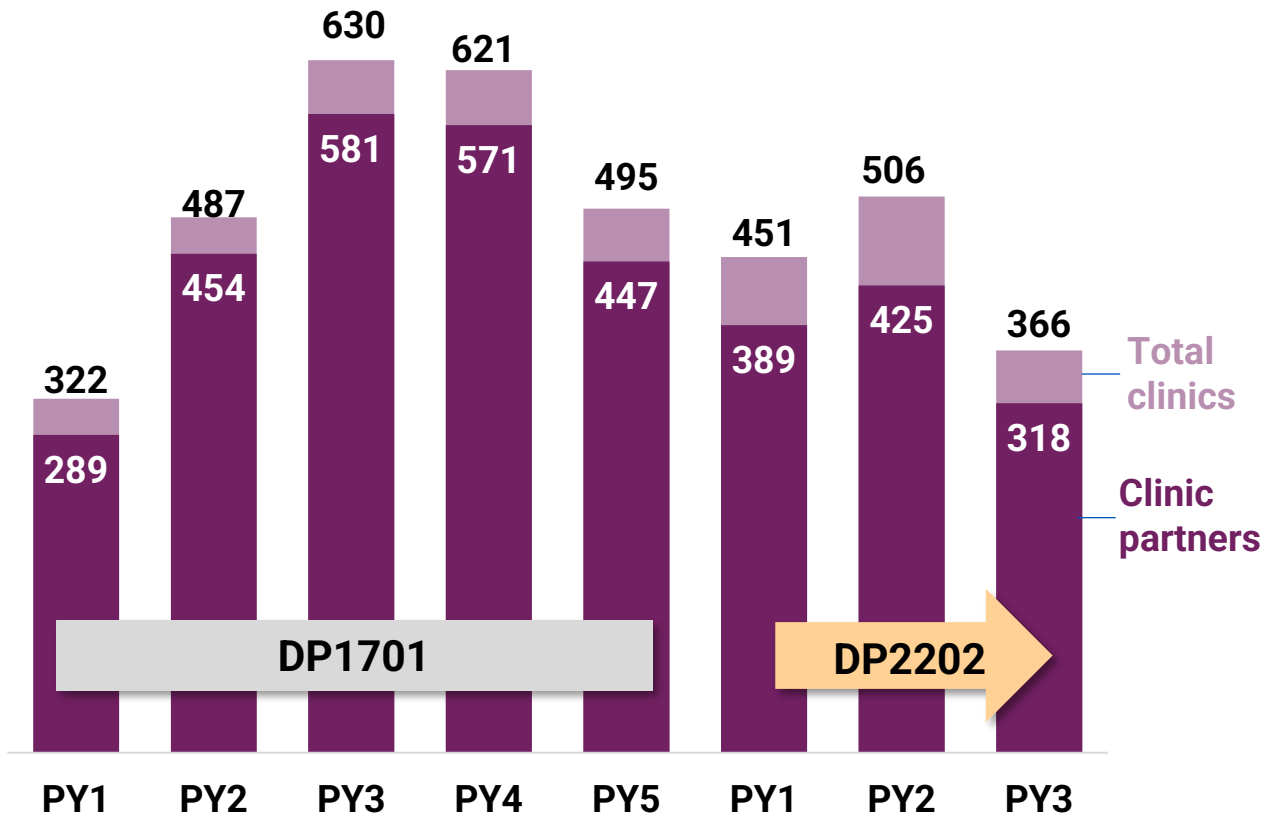
37%
Non-metropolitan location

n = 359

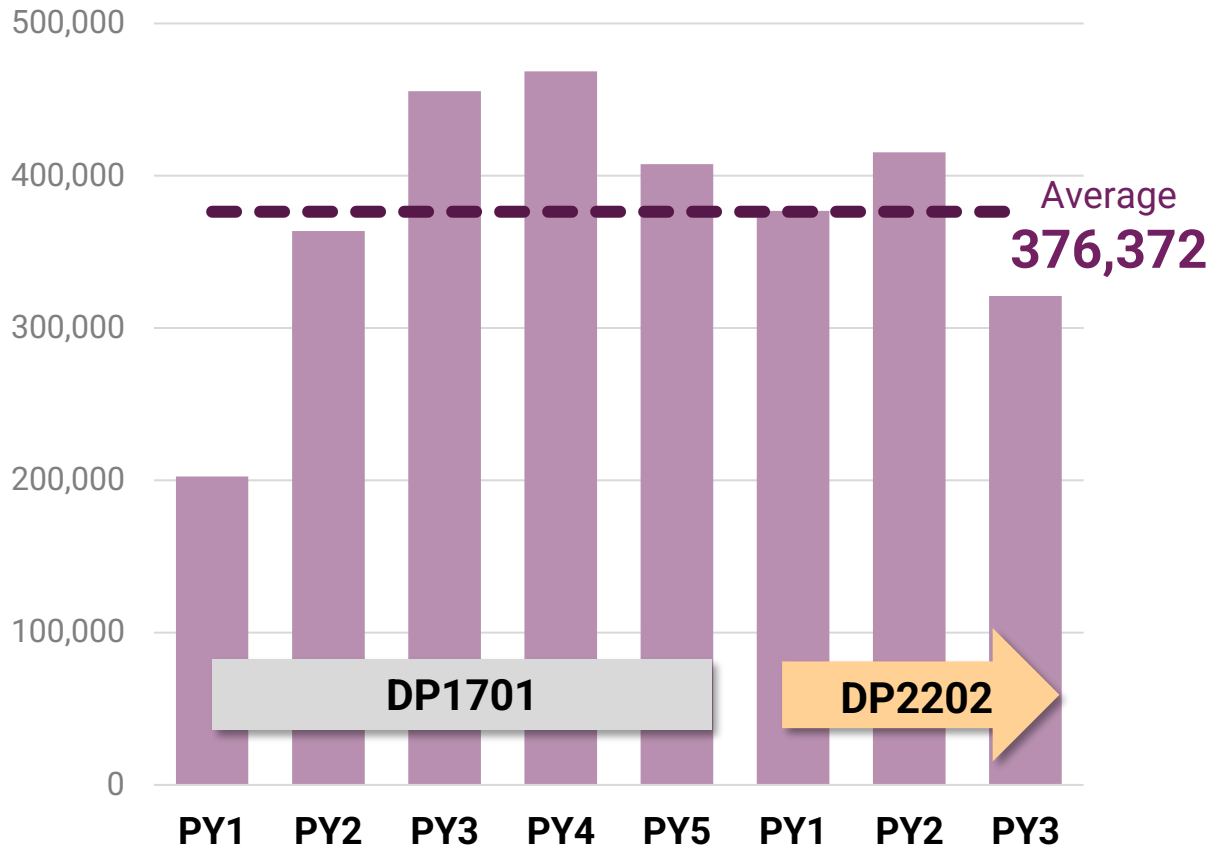
Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP1701, PY1-5 and DP2202, PY1-3.

Annual Reach of Breast Partner Clinics

Total Clinics and Clinic Partners



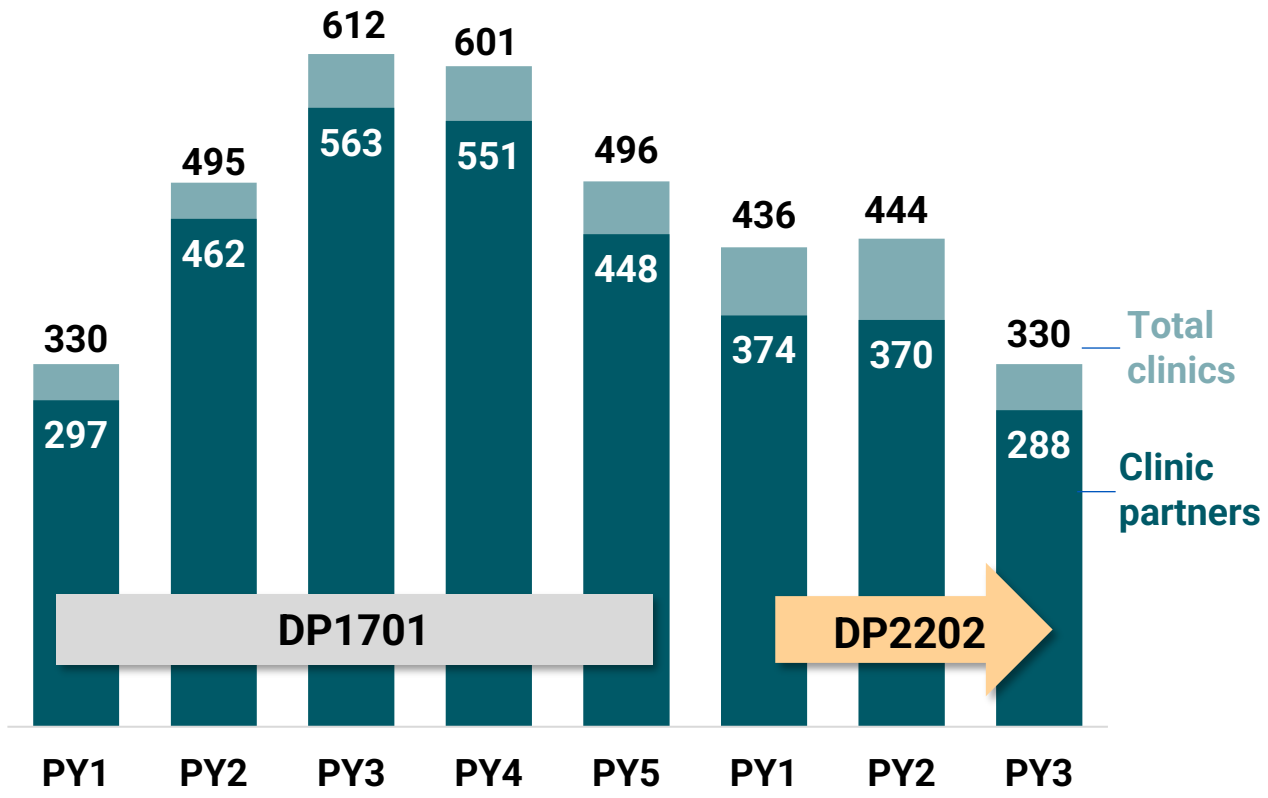
Screening Age-Eligible Women (ages 50-74)



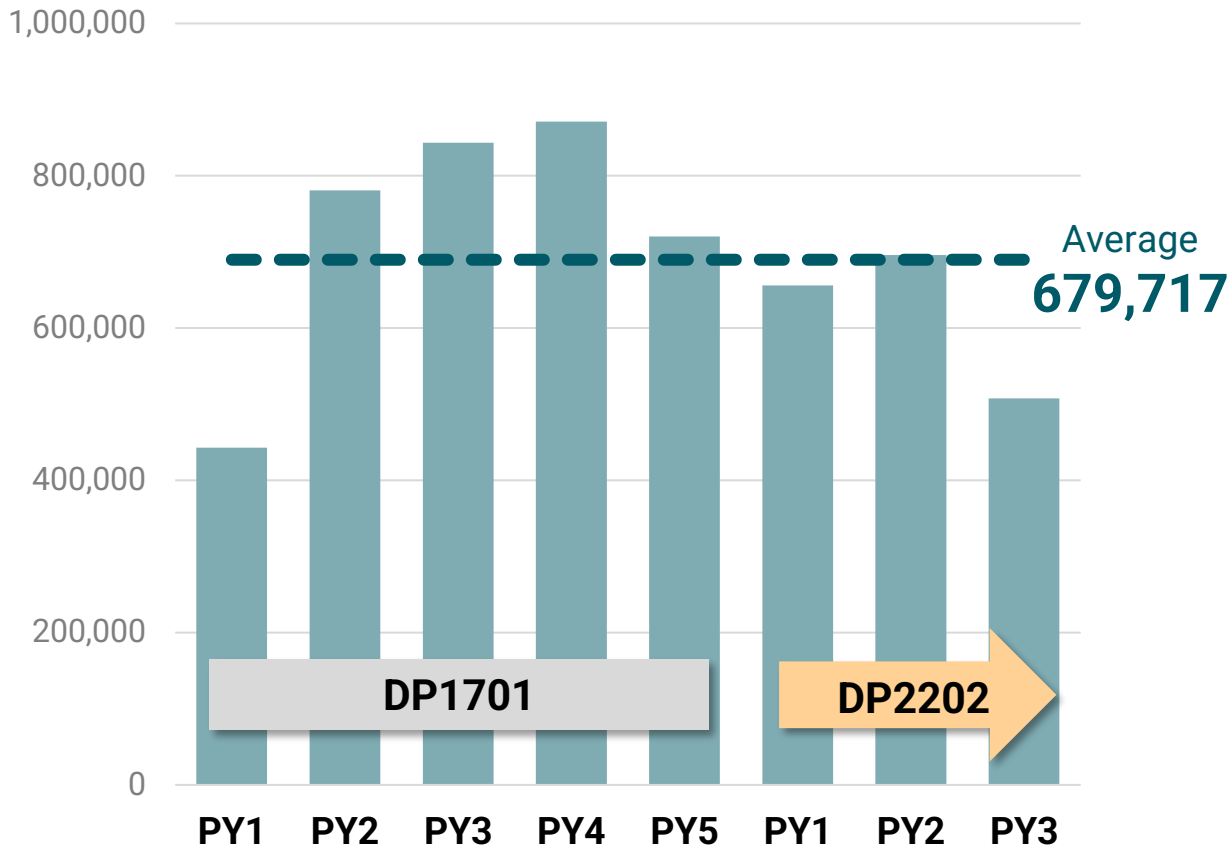
Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP1701, PY1-5 and DP2202, PY1-3.

Annual Reach of Cervical Partner Clinics

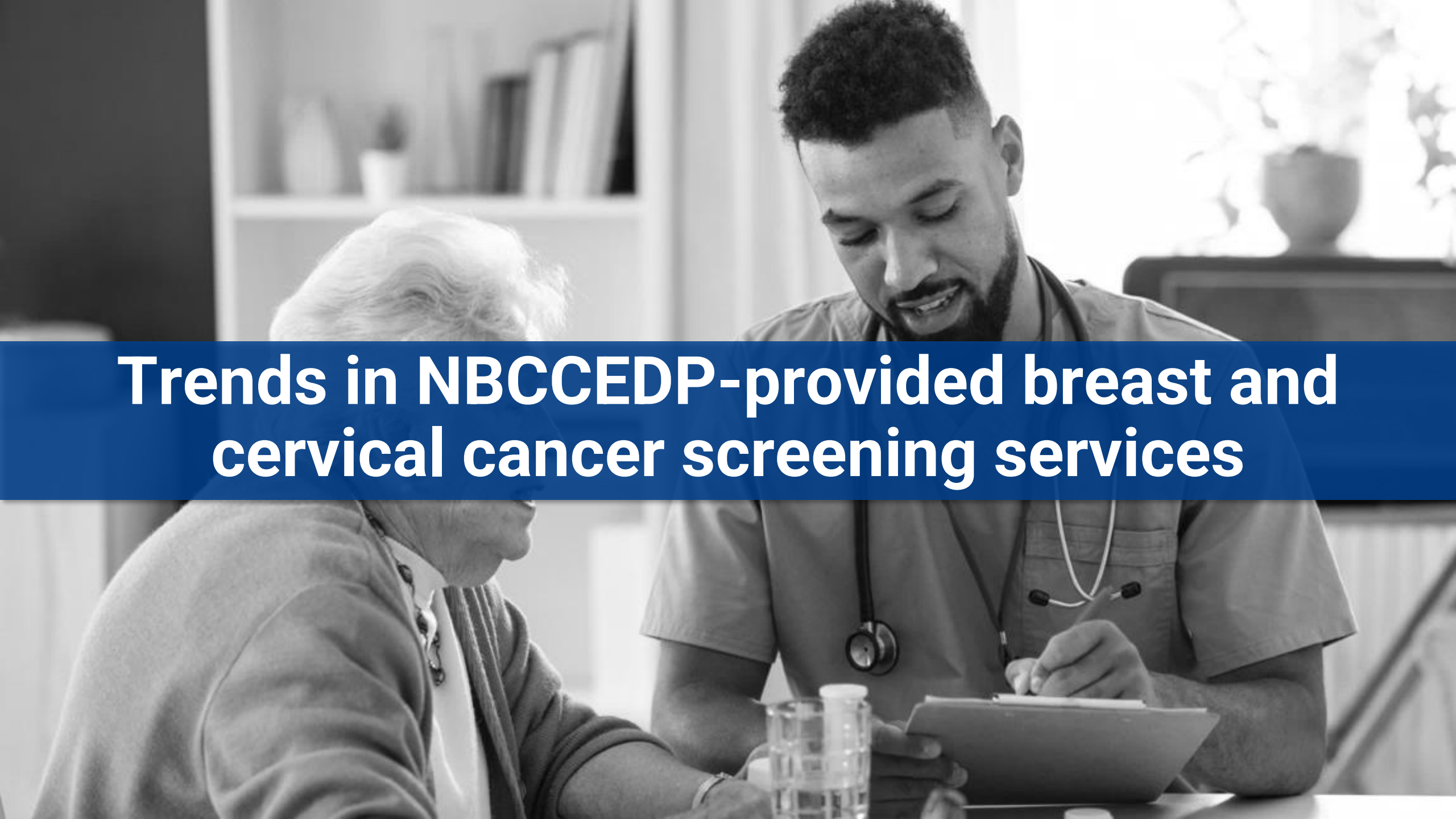
Total Clinics and Clinic Partners



Screening Age-Eligible Women (ages 40-64)

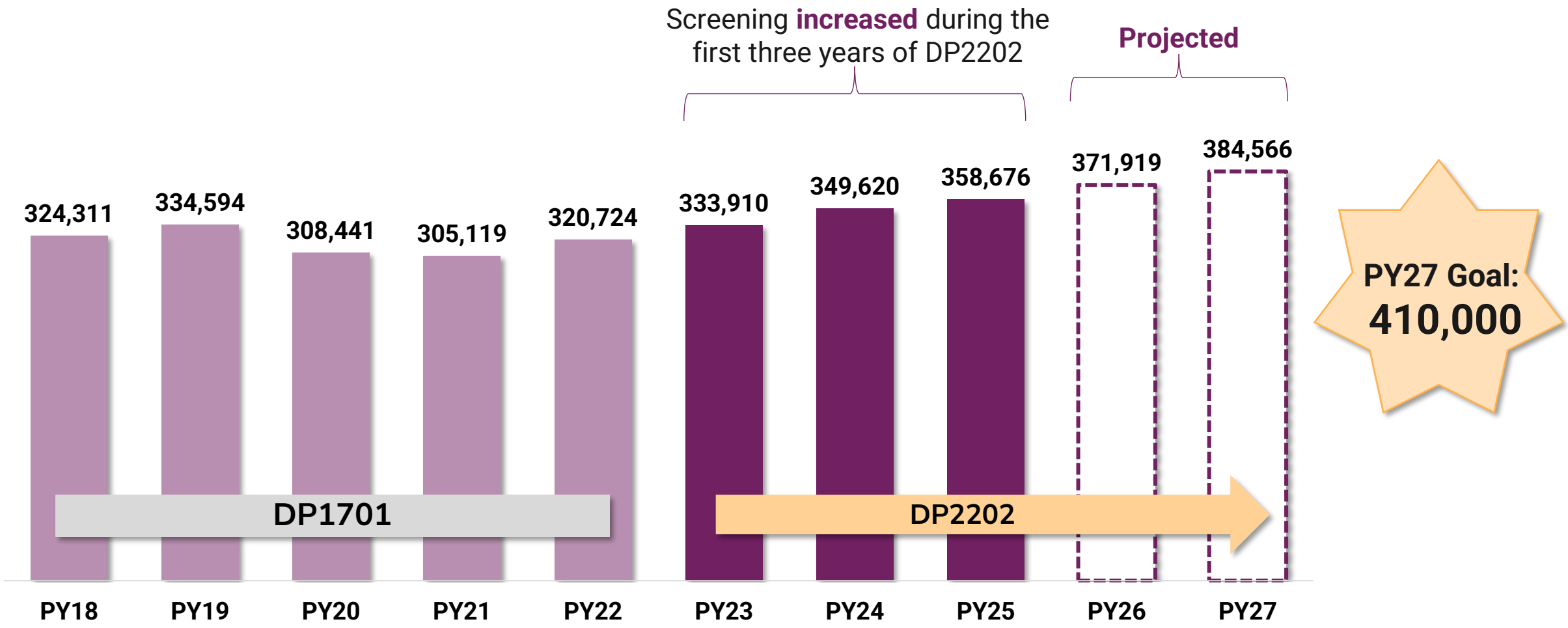


Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP1701, PY1-5 and DP2202, PY1-3.



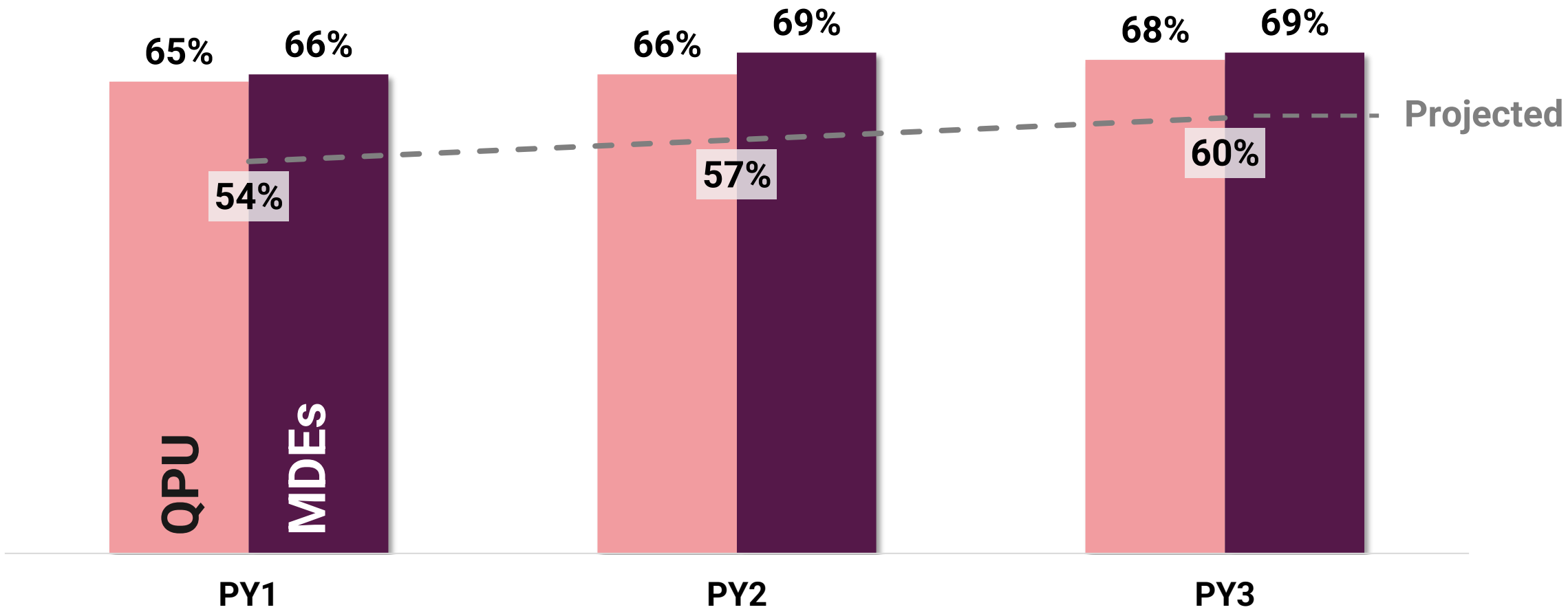
Trends in NBCCEDP-provided breast and cervical cancer screening services

The number of women served has **increased over time** and we are making **strong progress towards the program goal**



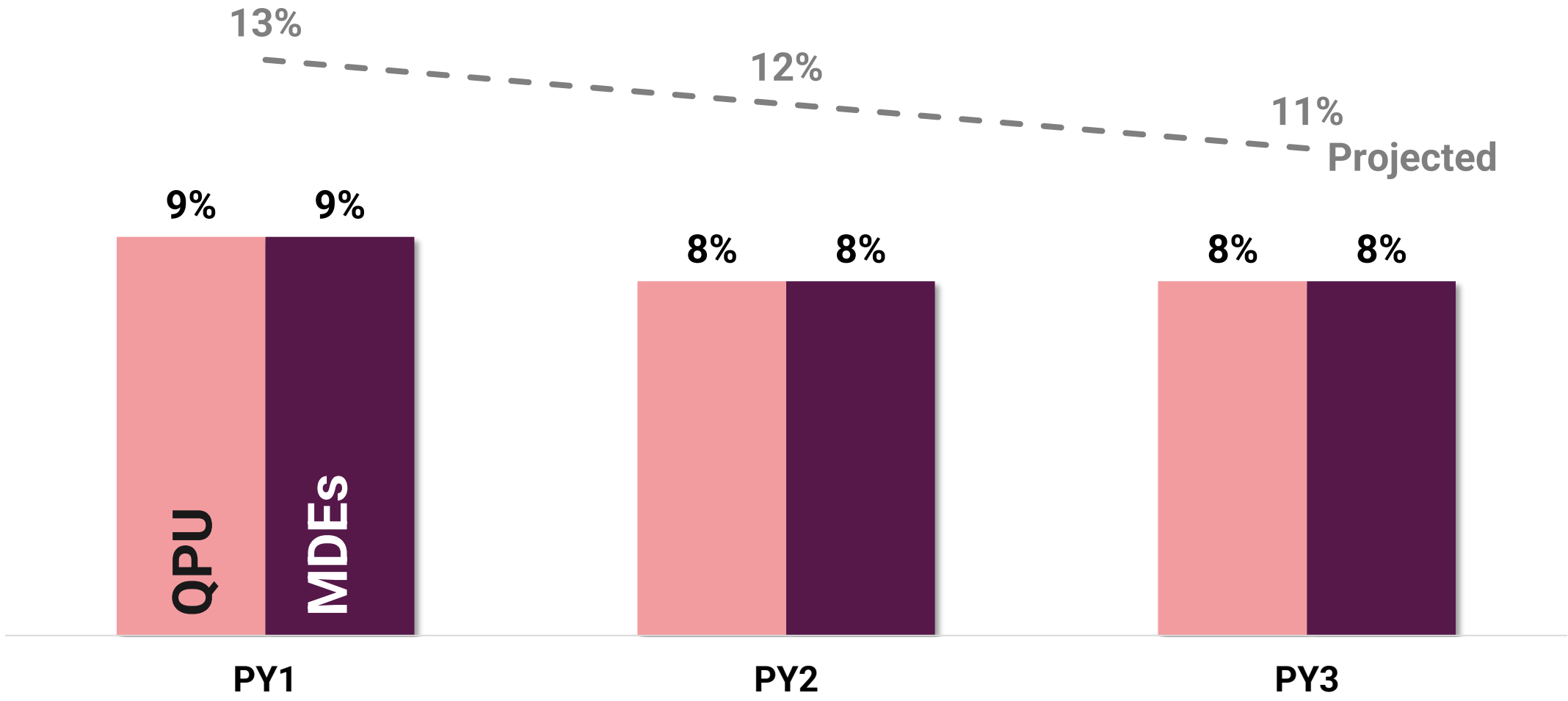
Source: April 2026 MDE Submission

The percent of **Hispanic women served** has steadily **increased since PY1**, serving more than projected



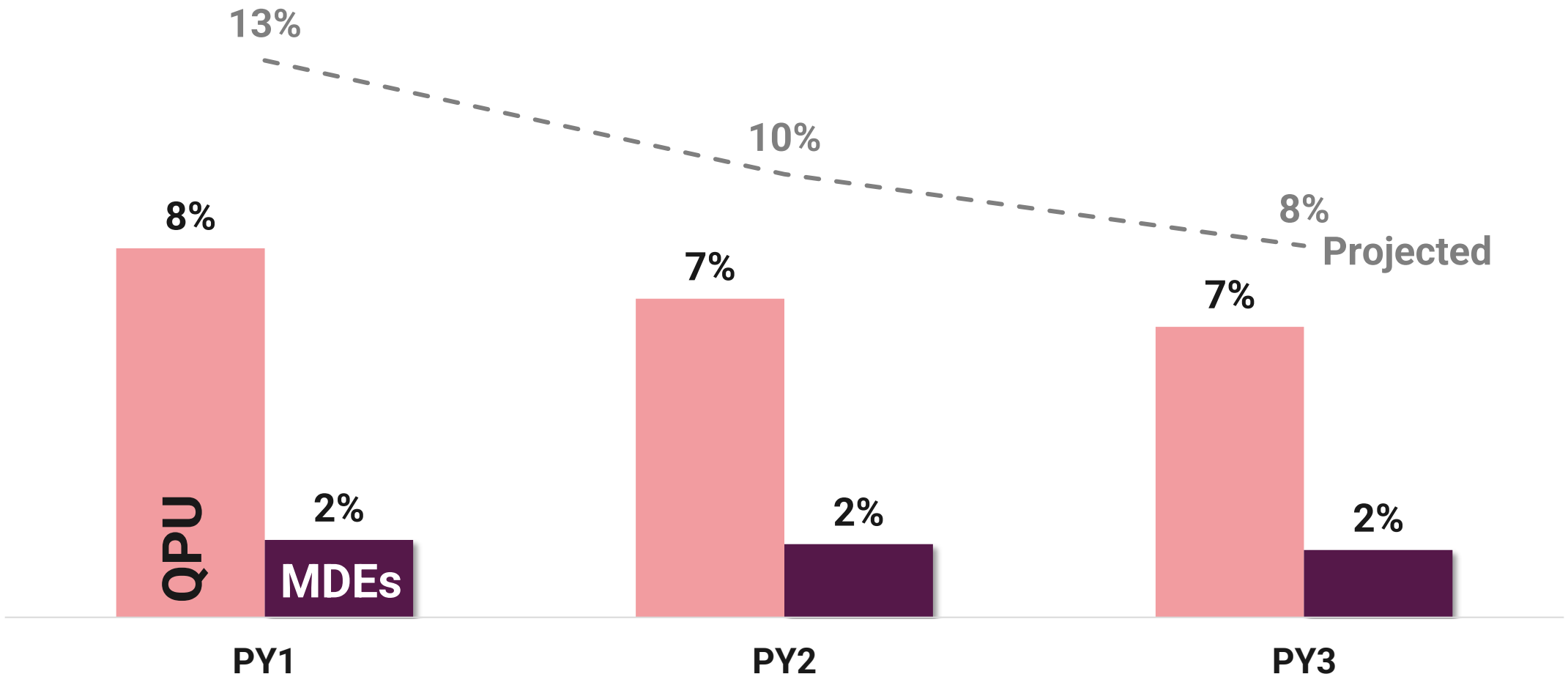
Source: Quarterly Program Update (QPU), PY1-3, April 2026 MDE submission

The percent of **Black women served** has **decreased since PY1,** serving less than projected



Source: Quarterly Program Update (QPU), PY1-3, April 2026 MDE submission

The percent of **rural women served** has been **consistent since PY1**, serving less than projected.



Source: Quarterly Program Update (QPU), PY1-3, April 2026 MDE submission

Meeting **cervical core performance indicators** has been **challenging in DP2202**

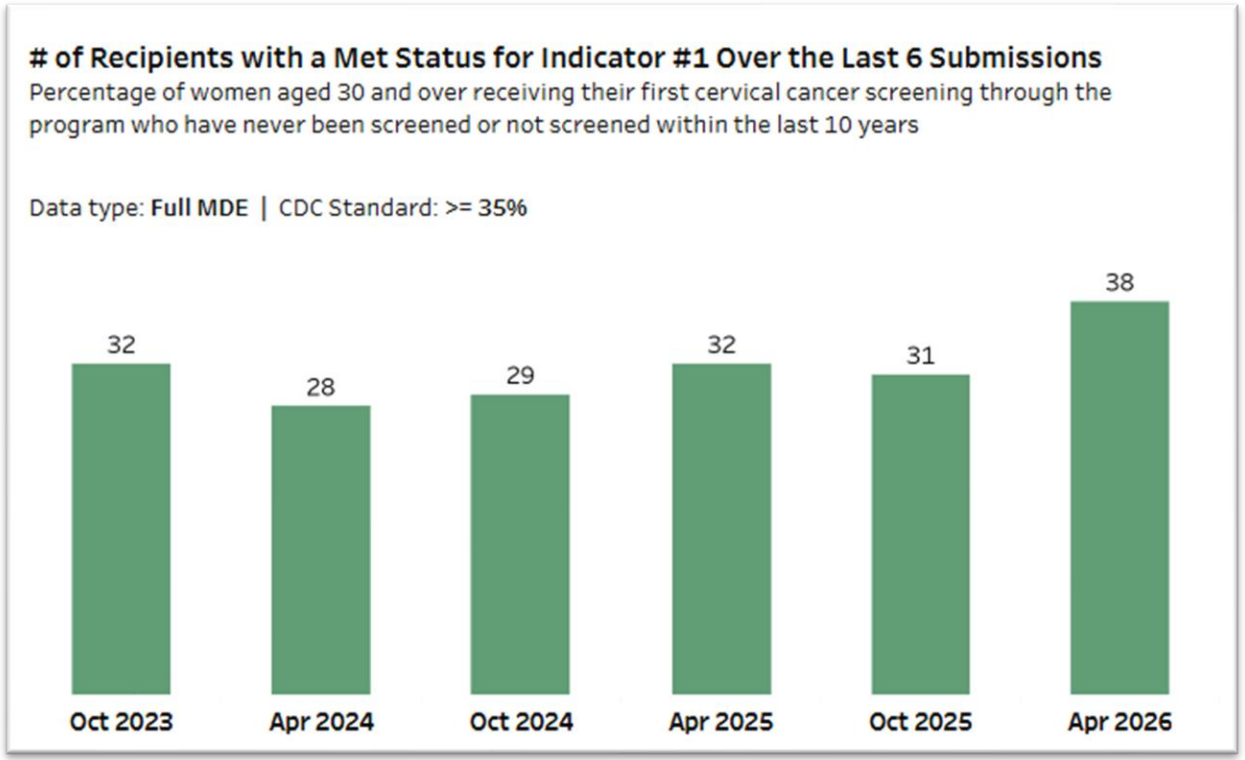
Data Type	#	Item Description	CDC Standard	Oct 2023 1/2022 - 12/2022	Apr 2024 7/2022 - 6/2023	Oct 2024 1/2023 - 12/2023	Apr 2025 7/2023 - 6/2024	Oct 2025 1/2024 - 12/2024	Apr 2026 7/2024 - 6/2025
Full MDE	1	Percentage of women aged 30 and over receiving their first cervical cancer screening through the program who have never been screened or not screened within the last 10 years	>= 35%	Not Met 30.6% (21,802/71,253)	Not Met 30.8% (22,353/72,600)	Not Met 30.5% (22,807/74,703)	Not Met 31.1% (22,351/71,833)	Not Met 30.8% (22,869/74,294)	Not Met 33.2% (24,306/73,289)
	2	Percentage of cervical cancer screening records with planned and completed diagnostic follow-up	>= 90%	Met 90.8% (12,296/13,539)	Met 90.8% (12,674/13,953)	Not Met 88.8% (11,972/13,481)	Not Met 87.4% (11,652/13,335)	Not Met 88.8% (12,915/14,537)	Not Met 88.7% (13,032/14,696)
	3	Percentage of cervical cancer screening records with planned and completed diagnostic follow-up and time between screening and final diagnosis <= 60 days	>= 75%	Not Met 62.5% (6,061/9,700)	Not Met 62.8% (6,154/9,803)	Not Met 63.7% (6,185/9,704)	Not Met 65.9% (6,154/9,343)	Not Met 66.3% (6,889/10,388)	Not Met 65.1% (6,936/10,662)
	4	Percentage of cervical cancer records with a final diagnosis of HSIL, CIN2, CIN3/CIS, or invasive cervical cancer that have treatment started	>= 90%	Not Met 87.0% (1,428/1,642)	Not Met 85.2% (1,527/1,792)	Not Met 85.4% (1,534/1,797)	Not Met 82.8% (1,401/1,692)	Not Met 83.9% (1,513/1,803)	Not Met 86.8% (1,650/1,902)
	5	Percentage of cervical cancer records with a final diagnosis of HSIL, CIN2, CIN3/CIS, or invasive cervical cancer with time between final diagnosis and treatment <= 60 days	>= 80%	Met 79.3% (1,128/1,423)	Met 78.9% (1,201/1,522)	Not Met 77.4% (1,185/1,531)	Not Met 76.8% (1,073/1,398)	Not Met 76.7% (1,160/1,512)	Met 79.1% (1,305/1,649)
	6	Percentage of mammogram screening records with abnormal results and completed diagnostic follow-up	>= 90%	Met 92.5% (25,276/27,319)	Met 91.9% (25,707/27,961)	Met 91.5% (25,900/28,312)	Met 91.4% (25,777/28,208)	Met 91.2% (27,364/30,008)	Met 90.0% (26,574/29,532)
	7	Percentage of mammogram screening records with completed follow-up and time between abnormal screening and final diagnosis <= 60 days	>= 75%	Met 84.5% (21,354/25,261)	Met 84.4% (21,690/25,702)	Met 84.4% (21,847/25,889)	Met 84.2% (21,694/25,769)	Met 83.1% (22,735/27,361)	Met 83.1% (22,092/26,570)
	8	Percentage of breast cancer records with a final diagnosis of 'CIS, other', DCIS, or invasive breast cancer that have treatment started	>= 90%	Met 93.3% (2,420/2,593)	Met 93.4% (2,319/2,483)	Met 92.8% (2,240/2,414)	Met 91.8% (2,238/2,439)	Met 89.4% (2,273/2,543)	Met 92.3% (2,267/2,455)
	9	Percentage of breast cancer records with a final diagnosis of 'CIS, other', DCIS, or invasive breast cancer with time between final diagnosis and treatment <= 60 days	>= 80%	Met 87.1% (2,100/2,410)	Met 86.8% (2,005/2,309)	Met 87.2% (1,949/2,234)	Met 86.9% (1,940/2,232)	Met 86.6% (1,965/2,268)	Met 86.7% (1,964/2,264)

Source: April 2026 MDE submission

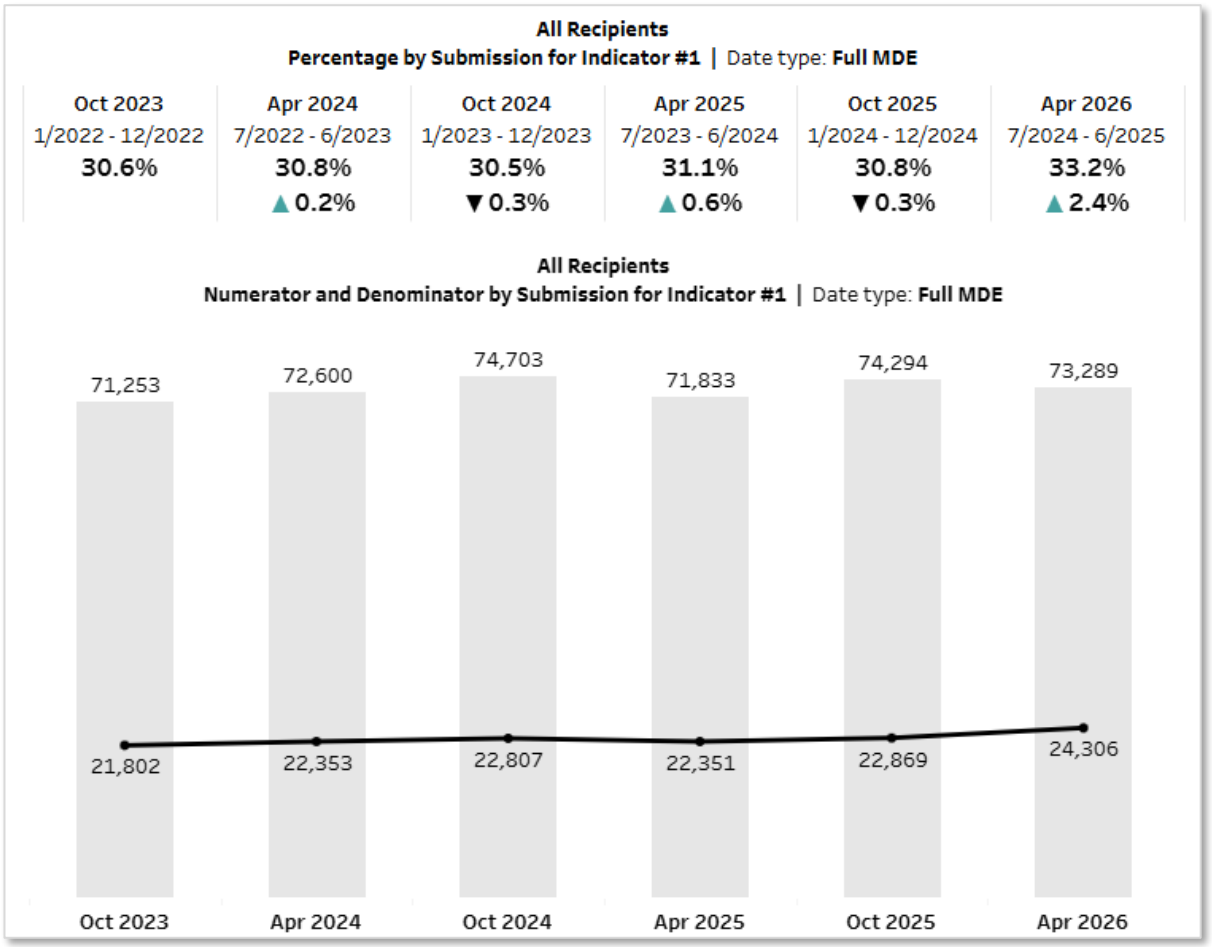
How is the NBCCEDP doing with Indicator #1?

Percentage of women aged 30 and over receiving their first cervical cancer screening through the program who have never been screened or not screened within the last 10 years (CDC Standard >= 35%)

More recipients are **meeting the benchmark**



The percentage has **remained stable around 30%**



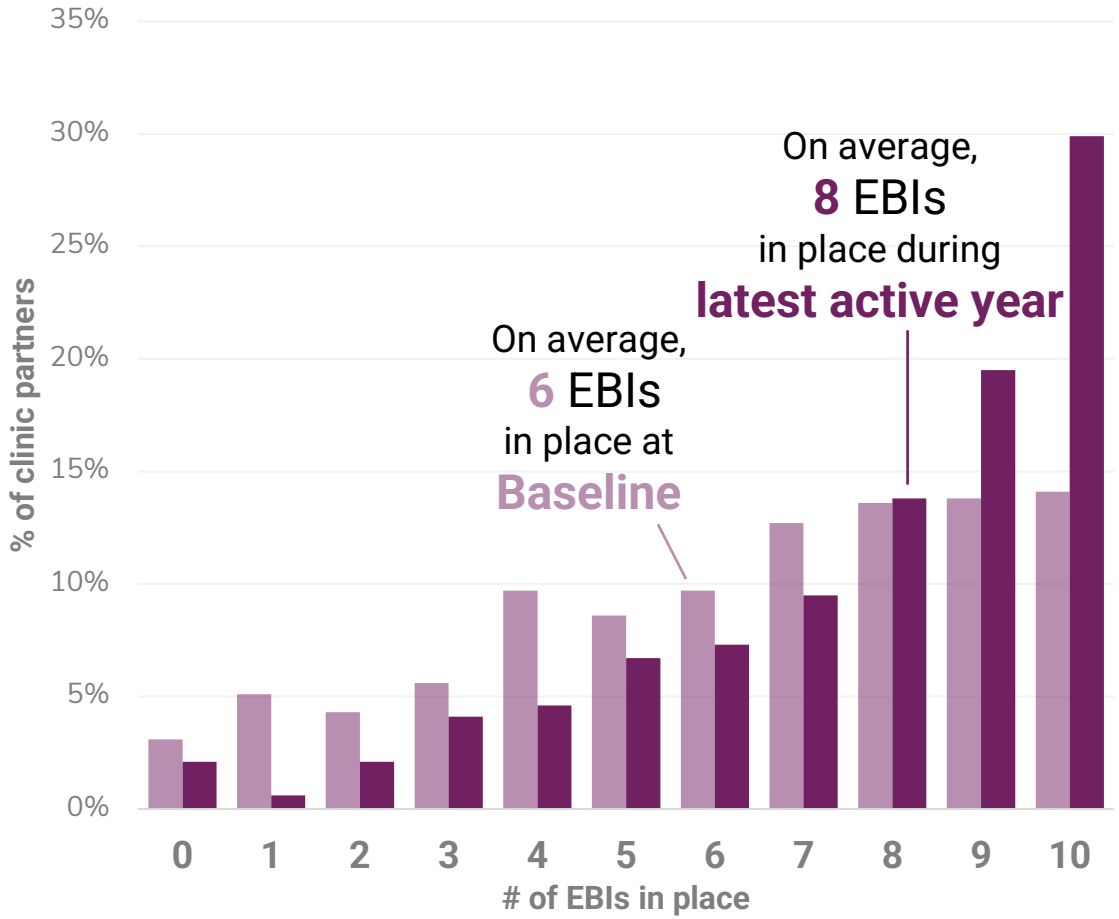
Source: April 2026 MDE submission



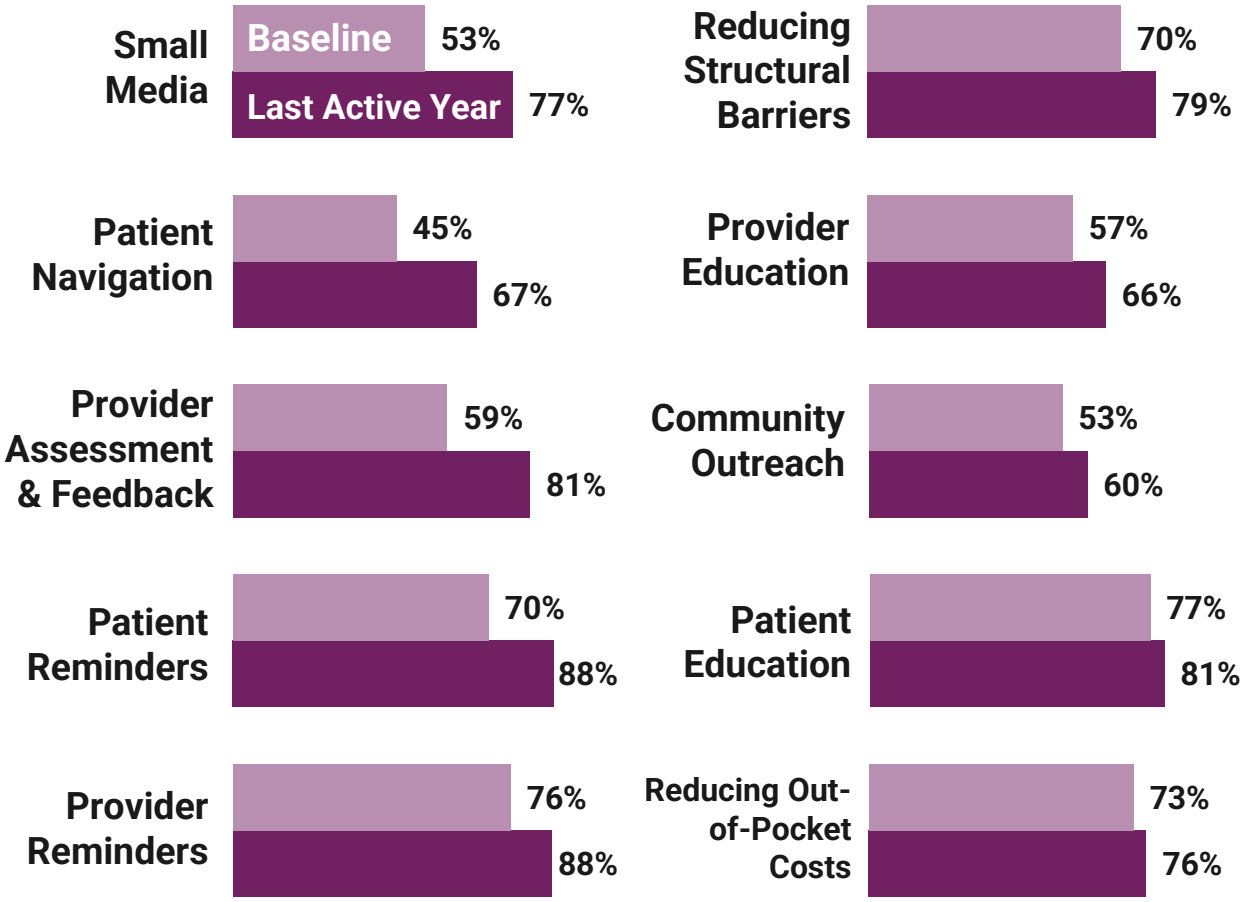
EBI implementation and trends in clinic-level screening prevalence

Breast clinics implemented a **high number of EBIs** and have **increased** them over time

Average # of EBIs in place from baseline to latest completed active year (n=1,004 clinics)



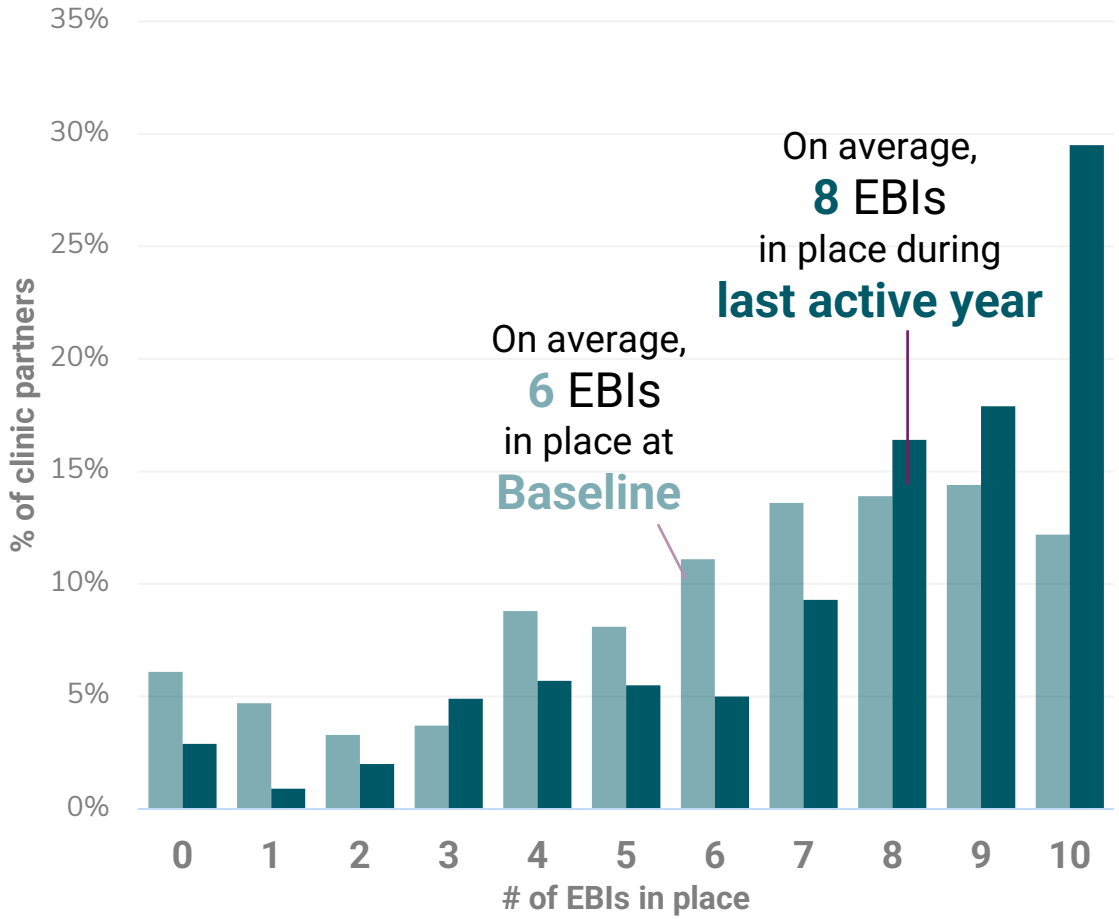
% of clinic partners with increased frequency



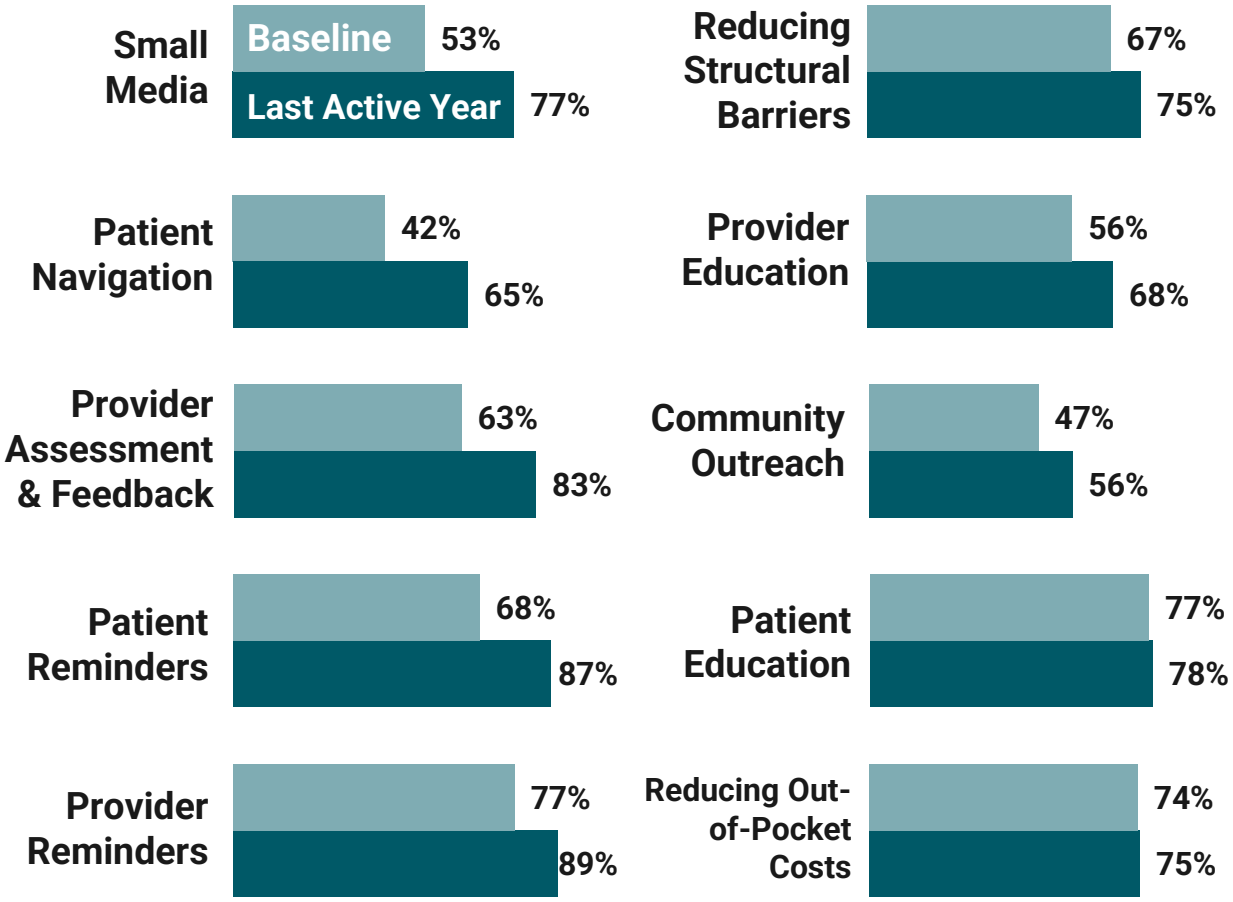
Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP1701, PY1-5 and DP2202, PY1-3.

Cervical clinics implemented a **high number of EBIs** and have **increased** them over time

Average # of EBIs in place from baseline to latest completed active year (n=962 clinics)

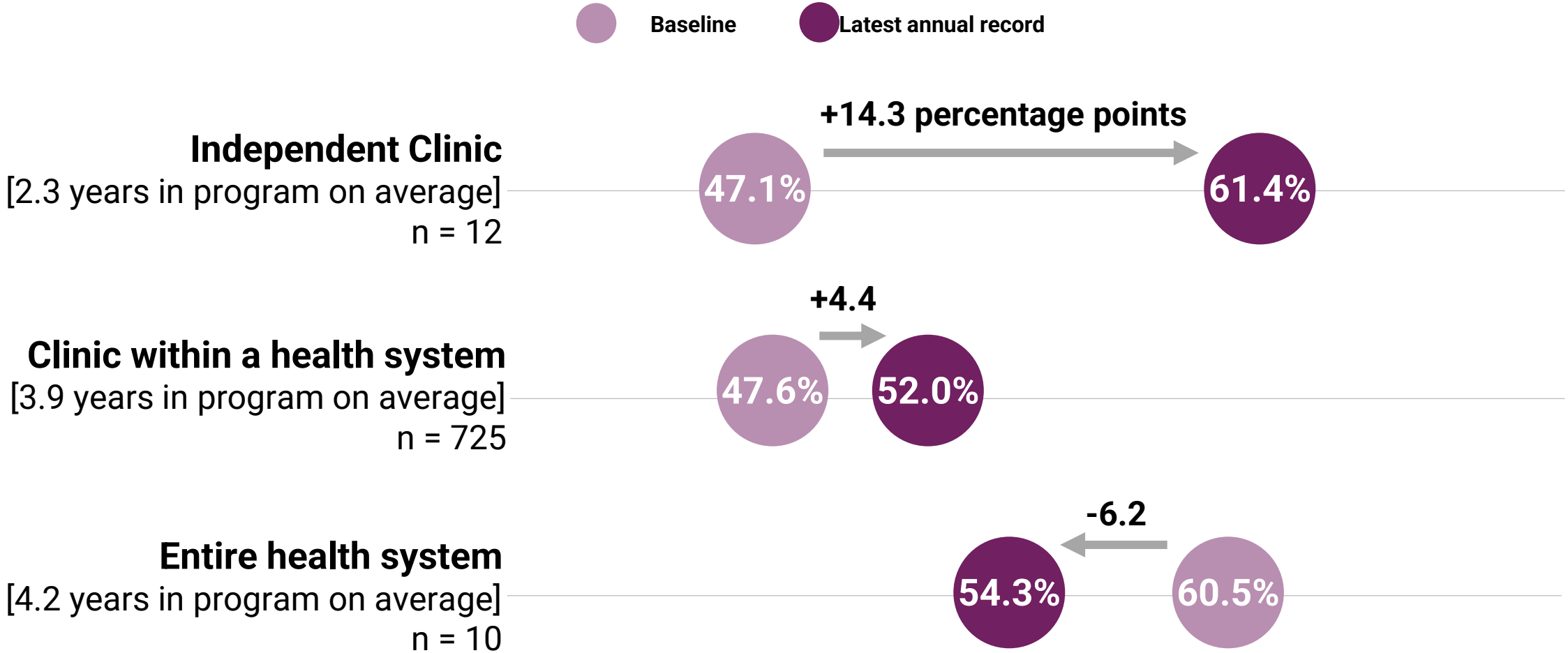


% of clinic partners with an increase in frequency



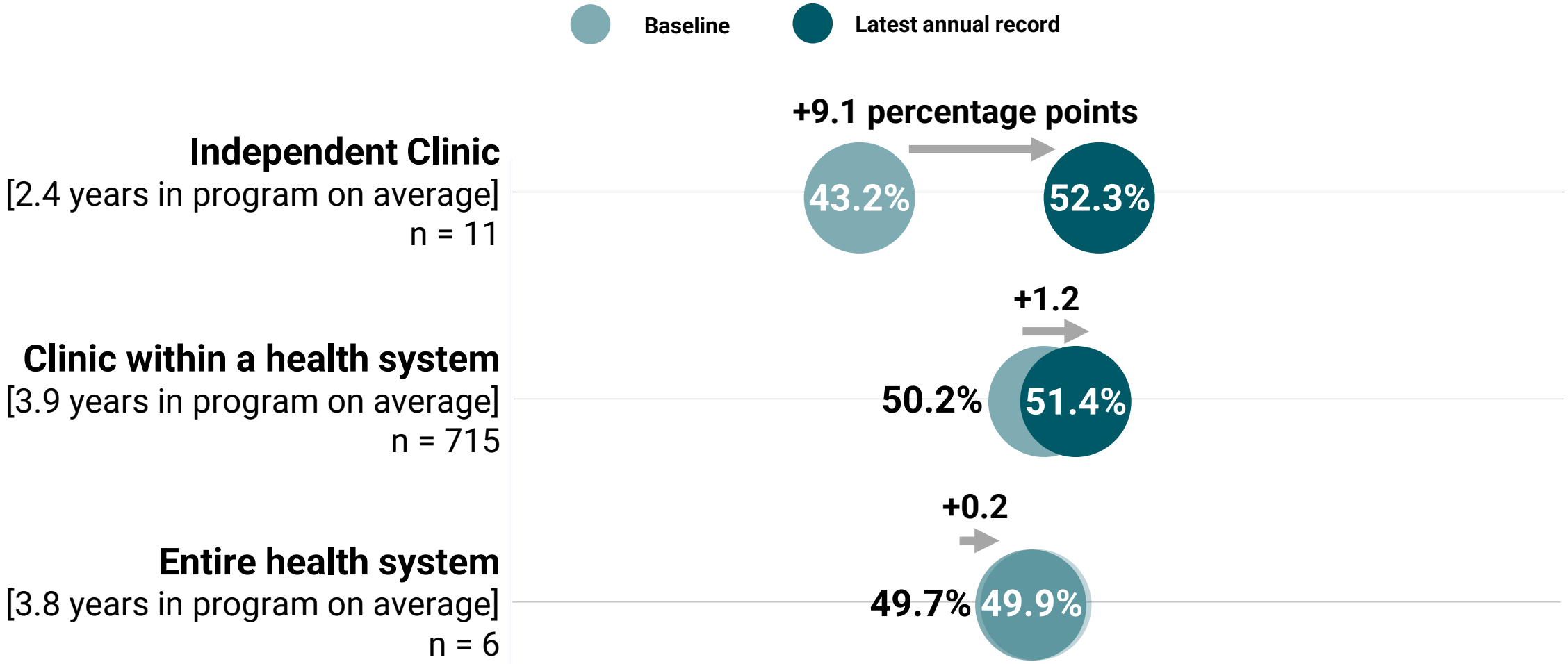
Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP1701, PY1-5 and DP2202, PY1-3.

The largest **breast cancer screening prevalence increases** were seen in **independent clinics and sites with 2+ years in the program**



Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP17-1701, PY1-5 and DP2202, PY 1-3

The largest **cervical cancer screening prevalence increases** were seen in **independent clinics and sites with 2+ years in the program**



Source: Clinic data submission, Sep 2025
Includes all clinics recruited in DP17-1701, PY1-5 and DP2202, PY 1-3



A few final thoughts for the road

Upcoming PY5 Evaluation Due Dates

Coming up in 2026

Date		Data
September	30th	Annual Clinic Data
October	15th	MDEs
	31st	Quarter 1 QPU
November	30th	Annual Evaluation Report
December	31st	Success Story 1

2027

Date		Data
January	31st	Quarter 2 QPU
March	31st	Annual Clinic Data
April	15th	MDEs
	30th	Quarter 3 QPU
June	29th	Success Story 2
	30th	Quarter 4 QPU
	30th	Annual and Baseline Clinic Data
	30th	Annual Survey

IT's SME: Data Office Hours with the Evaluation Team and IMS

Date: **Wednesday, August 19th**

Time: **3:30 – 4:30 PM**

Where: **Dunwoody, Room A**

Opportunity to provide Tableau feedback

Thank you!

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 https://www.cdc.gov/
Follow us on social **@CDCgov**

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the U. S. Centers for Disease Control and Prevention.