

A large, stylized blue ribbon graphic that forms a shape reminiscent of a caduceus or a medical symbol. The ribbon is thick and has a slight 3D effect with a lighter blue shadow. It is set against a background of light blue and white curved shapes.

70x2020
Colorectal Cancer Screening Initiative

2015 Strategic Plan

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Strategic Plan Overview

The goal of the 70x2020 Colorectal Cancer Screening Initiative is to ensure that at least 70% of Mississippians are up-to-date with recommended colorectal cancer screening by the year 2020. To reach the 70x2020 goal, all parties with a vested interest in reducing the burden of colorectal cancer in Mississippi shall work as a collaborative partnership.

The three major sectors of this partnership are:

The general public and non-governmental organizations which promote the general welfare of the public, health care providers and organizations affiliated with health professionals and health care systems, and governmental agencies, elected officials and legislative bodies which establish and enforce health care policy.

Strategic Efforts

The first strategic effort is to change Mississippi's attitudes about colorectal cancer by engaging in an ongoing public conversation. This process begins by increasing colorectal cancer awareness and culminates with broadly disseminated public knowledge about and participation in colorectal cancer preventive screening.

The second strategic effort is to change Mississippi's colorectal cancer control tactics. Increasing health literacy of the general public will increase consumer demand for preventive screening capacity. Based on sound business practices, increasing business volume in the health care system will require improved quality and efficiency. This will be accomplished through the delivery of evidence-based best practices and medical services from primary to specialty care. The result of this coordination will be the seamless integration of early detection and preventive screening services with effective follow-up medical treatment.

The third strategic effort is to address Mississippi's geographic and population-based health disparities. An array of tactics will be implemented to maximize health benefits to those who are currently medically underserved. Target groups will be identified and funds will be secured to provide high-quality screening services to those who lack access to such health services.

Success

The success of the collaborative partnership will be gauged by health outcomes, not by the amount of effort invested. Therefore, the most reliable and objective data will be continually gathered and analyzed, not only to assess progress towards the 70x2020 goal, but to refine and direct activities of the partnership.

Ultimately, demand from both consumer and business sectors will require Mississippi's state government to establish a mandate for institutional responsibility, authority and accountability of a defined colorectal cancer control program. This transformative event must happen before the year 2020 to ensure that sustainable, systematic and permanent improvements occur in Mississippi's colorectal cancer prevention and control program.

This strategy will be implemented through the following 10 tactics as monitored by an oversight committee. The tactics described in this plan are non-restrictive, and 70x2020 Partnership members may autonomously pursue additional tactics to meet or exceed the 70x2020 goal. A task force will be formed for each of the following tactics, and each task force will be responsible for monitoring activities throughout Mississippi, coordinating efforts as needed to improve efficiency and increase impact. Each task force will present a summary progress report to the 70x2020 Colorectal Cancer Screening Partnership at least annually, and will make recommendations for further improvements to the 70x2020 Strategic Plan as required to meet or exceed the 70x2020 goal.

- 1) 90 percent CRC screening among eligible participants in the State and School Employees' Health Insurance Plan
- 2) 90 percent CRC screening among eligible veterans, military service members and their immediate families
- 3) 90 percent CRC screening among eligible insured employees via workplace participation
- 4) Increase stool-based CRC screening via primary health care providers, CHCs, FQHCs and RHCs
- 5) Improved continuity of care linkages between primary and specialty health care providers
- 6) Community engagement
- 7) Communication
- 8) Improved metrics via health data analytics
- 9) Mission-focused funding strategy
- 10) 2020 transition

Tactical plan to reach 90 percent CRC screening among eligible participants in the State and School Employees' Health Insurance Plan

Preventive colorectal cancer (CRC) screening is a wellness benefit available to active and retired employees age 50 or over who participate in the State and School Employees' Health Insurance Plan (Plan). To obtain at least 90 percent of Plan participant compliance with recommended CRC screening practices, the following tactical plan will be implemented.

Reach out to the executive directors of employers who offer health coverage through the Plan. Ask that each director encourage his or her staff to get CRC screenings and coordinate educational efforts with wellness/site champions and worksite wellness committees.

Work with the State and School Employees Health Insurance Management Board to collect aggregate participant CRC screening rates based on de-identified participant wellness claims. This aggregate data will be collected and maintained in a fashion which will not involve the use of any protected personal health information.

Identify and support the Plan's existing communication tools, including quarterly participant newsletters, monthly employer newsletters, etc., to promote CRC screening among eligible Plan participants and their dependents.

Support the Plan in its current efforts to utilize its health management vendor and third-party claims administrator to help remind eligible participants to get regular CRC screenings.

Tactical plan to reach 90 percent CRC screening among eligible veterans, military service members and immediate families

The U.S. Department of Veterans Affairs (VA) has established colorectal cancer screening and prevention as a major health priority. Preventive colorectal cancer (CRC) screening is a wellness benefit available to active and retired military veterans age 50 or over. To obtain at least 90 percent compliance with recommended CRC screening practices in Mississippi's military and veteran population, the following tactical plan will be implemented by a series of targeted interactions with veterans and veteran leadership, as described below.

Contact the state adjutant general, the executive director of the Veteran's Affairs Board, the department commanders of the American Legion, Veterans of Foreign Wars (VFW) and Military Order of the Purple Heart (MOPH), and the commander of the Mississippi Disabled American Veterans (DAV). These individuals will be provided written information and multimedia information describing the risks and benefits of screening for colon cancer and the VA's strong interest in obtaining this screening. Ask each official to encourage his or her staff to get CRC screenings and to join the 70x2020 Colorectal Cancer Screening Partnership.

Coordinate outreach and education efforts for veterans with these organizations to directly communicate with Mississippi's veteran population. These efforts will include (but are not limited to) personal appearances by faculty physicians, resident and fellow physicians and medical students, as well as other UMMC representatives. Identify and support these organizations' existing communication tools, including newsletters, to promote CRC screening among eligible veterans, service members and their immediate families. Provide coordinated support to these organizations' wellness champions and wellness committees as requested.

Arrangements will be made for one or more special veterans' medical programs on Southern Remedy radio, a weekly program that is broadcast by Mississippi Public Broadcasting throughout the state. This special program will focus on colon cancer and colon cancer screening, although it will also cover other veteran-specific topics.

Work with Mississippi's Veterans Health Administration (VHA) facilities to support their medical efforts to screen eligible veterans, service members and their immediate families for colorectal cancer. Facilitate CME activities to ensure VHA medical staff are up-to-date with colorectal cancer screening and medical follow-up procedures. To the extent allowed by law, VA directives and VHA policies, collect aggregate participant CRC screening rates based on de-identified participant wellness claims. This aggregate data will be collected and maintained in a fashion which will not involve the use of any protected personal health information, nor violate additional VA directives or VHA policies.

Tactical plan to reach 90 percent CRC screening among eligible insured employees via workplace participation

The Affordable Care Act (ACA) requires private health insurers to cover recommended preventive colorectal cancer (CRC) screening to health insurance plan participants. A large proportion of Mississippians receive employer-sponsored coverage, either through their own job or as an employee's dependent. These individuals should be able to comply with CRC screening recommendations without encountering major obstacles. To ensure that at least 90 percent of such Mississippians are compliant with recommended CRC screening practices, the following tactical plan will be implemented.

Reach out to the executive directors of major employers who offer health coverage to their employees and their dependents. Ask that each director encourage his or her staff to get CRC screenings, and coordinate educational efforts with wellness/site champions and worksite wellness committees.

Work with health care insurance providers who offer ACA-compliant workplace health insurance plans in Mississippi to reach this objective. Identify and support the provider's existing communication tools, including quarterly participant newsletters, internet-based preventive medicine newsletters, etc., to promote CRC screening among eligible participants and their dependents.

Work with health care insurance providers to collect aggregate participant CRC screening rates based on de-identified participant wellness claims. This aggregate data will be collected and maintained in a fashion which will not involve the use of any protected personal health information.

Provide additional support as appropriate to major employers and health care insurance providers to remind eligible participants that recommended CRC screenings will help assure that their working years will transition into a healthy and active retirement lifestyle.

Tactical plan to increase stool-based CRC screening via primary health care providers, CHCs, FQHCs and RHCs

Preventive colorectal cancer (CRC) screening via colonoscopy is a wellness benefit available to all Mississippians who participate in health insurance plans which are compliant with the Affordable Care Act. However, a significant proportion of Mississippians either do not have such health care insurance, do not have access to colonoscopy facilities or do not want to be screened by colonoscopy. For such individuals, early detection screening through stool-based Fecal Immunohistochemical Tests (FIT), high-sensitivity guaiac-based Fecal Occult Blood Tests (gFOBTs) or multi-target stool DNA tests is recommended. Strong recommendation is made for the FIT as the preferred low-cost, high-quality option for early detection CRC screening.

Multi-target stool DNA tests are the newest FDA-approved early detection colorectal cancer screening option. These tests may appeal to those who can afford them as an alternative to colonoscopy, but the higher cost of these new tests poses an economic obstacle for the uninsured working-poor population. High-sensitivity gFOBTs are the lowest-cost screening options, but require pre-test abstinence from a number of interfering foods and dietary supplements. Thus, FIT emerges as the preferred low-cost, high-quality stool-based CRC screening option. All stool-based CRC screening tests can be provided by primary health care providers, and the role of community health centers (CHCs), Federally-Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) is paramount in assuring that all eligible Mississippians are screened for colorectal cancer. To increase recommended stool-based colorectal cancer screening in Mississippi, the following tactical plan will be implemented.

Reach out to the administrative and medical directors of CHCs, FQHCs and RHCs to learn which particular regional or local problems exist and cooperate with them to develop effective solutions.

Provide accredited continuing medical education (CME) activities to primary care providers and the staff of CHCs, FQHCs and RHCs on evidence-based interventions to increase colorectal cancer screening. These evidence-based interventions should be consistent with the recommendations of the Community Guide. CME activities must also ensure that participants will be trained to use best practices and discontinue outdated practices.

Encourage and assist CHCs, FQHCs and RHCs to apply the processes described in the National Colorectal Cancer Roundtable's 2014 "Steps for Increasing Colorectal Cancer Screening Rates: A Manual for Community Health Centers." Such processes include the Flu-FIT and Flu-FOBT campaigns developed by the American Cancer Society.

Emphasize the importance of the role that primary care medical providers play in colorectal screening and in recommending the preferred screening tools for early detection.

Ensure that all areas of Mississippi are included in the 70x2020 Colorectal Cancer Screening Initiative, in particular areas that are rural and/or with limited access to colonoscopy-based preventive CRC screening.

Coordinate all stool-based CRC screening events sponsored by 70x2020 partners with appropriate primary care providers so that the screened individuals are connected to a "medical home."

Tactical plan to improve continuity-of-care linkages between primary and specialty health care providers

Due to the rural landscape throughout much of Mississippi, many Mississippians primarily rely on stool-based, early detection colorectal cancer (CRC) screening methods. These Mississippians must often travel out of their home communities to receive follow-up colonoscopies. Whenever suspicious lesions initially observed through colonoscopy are confirmed as colorectal cancers (CRCs), surgeons, oncologists and other medical specialists are required to join the patient's health care team. To improve the continuity of patient care requiring coordinated multidisciplinary efforts of primary and specialty health professionals, the following tactical plan will be implemented.

Work with organizations which represent relevant health professionals, including but not limited to the Mississippi Gastroenterology Society, the Mississippi Primary Health Care Association and the Mississippi State Medical Association, to define the essential elements of a quality colonoscopy and an efficient referral system. Work with these organizations to encourage their membership to implement a quality colonoscopy referral system.

Generate, maintain and disseminate a geographic network map of primary and specialty medical practice sites to assess potential new linkages, with the objective of improving timely delivery of medical service to the consumer by relieving referral backlogs and reducing overload of frequently used specialty service providers.

Establish standard protocols with strategically located facilities to accommodate sporadic or recurring volunteer services of gastroenterologists who are licensed to practice their specialty in Mississippi. In communities where non-gastroenterologists perform colonoscopies, provide additional continuing medical education and other training opportunities to improve the quality of colonoscopies. Incorporate the use of medically validated, FDA-approved, evidence-based emerging technologies to improve the quality of endoscopic examination of the lower gastrointestinal tract.

Increase the availability and use of conventional and telemedicine-based patient navigator systems to assist patients, especially those from medically underserved communities, as they seek specialty medical services, including those required for the effective treatment of colorectal cancer.

Tactical plan for community engagement

Mississippi is a state rich in geographic, cultural and socioeconomic diversity. The consumer demand for high-quality preventive and early detection CRC screening options must authentically originate from within Mississippi's diverse communities. Yet it is essential to acknowledge that the state's geographic, cultural and socioeconomic diversity is also relevant to unacceptable disparities in colorectal cancer incidence, mortality and screening, which characterize Mississippi's current CRC situation. A coordinated community outreach effort is necessary for changes to become systemic, sustainable and permanent. To engage all Mississippi communities in efforts to increase recommended CRC screening practices, especially in rural, African-American and impoverished communities, the following tactical plan will be implemented.

Coordinate 70x2020 Partnership efforts involving statewide Colorectal Cancer Awareness Month campaign activities to take advantage of heightened consumer awareness during March. The communication tactics to be used must be tailored to specific audiences as described in the communications component of this plan.

Examine the effectiveness and durable impact of previous community outreach efforts, based on existing records of federal, state and private funding of prior community health projects in Mississippi. Use this information to catalog relevant and applicable community asset maps.

Identify and recruit local community champions, organizations and institutions. These champions will lead local community engagement efforts and serve as gatekeepers to the local community. Provide continuing support and assistance to these champions through the development and dissemination of community engagement toolkits. In communities where the need is greatest, secure funding for CRC health education efforts and evidence-based interventions to increase CRC screenings.

Recruit and deploy cadres of Community Health Advisors (CHAs) to increase one-on-one outreach. This outreach program has been shown to be an effective evidence-based intervention to increase CRC screening rates. Develop and maintain CRC-specific CHA training modules to increase CRC health literacy, screening rates and compliance.

Tactical plan for communication

Effective communication is an integral component of this Initiative, and accurate messages must be appropriately conveyed using mechanisms preferred by each audience. Diverse groups require different types of information concerning preventive and early detection colorectal cancer (CRC) screening, and the members of the 70x2020 Partnership require forums to share relevant information, coordinate efforts and review progress. To establish and maintain effective communication in support of this Initiative, the following tactical plan will be implemented.

Establish and maintain an electronic newsletter to share information with the 70x2020 Partnership on a regular basis. Relevant information for this newsletter includes recent and upcoming 70x2020 events; accomplishments of the 70x2020 Partnership; opportunities for funding, training and/or other resources; relevant national news concerning colorectal cancer science and health care policy; and attainment of 70x2020 Strategic Plan milestones.

Establish and maintain a central website dedicated to the 70x2020 Initiative which will include an archive of 70x2020 newsletters and other electronic information. This website will provide links to the websites of 70x2020 partner organizations and serve as a dynamic, up-to-date interactive repository of information available to the general public.

Use social media such as Facebook and Twitter to help 70x2020 partners and community members share their experiences and learn from each other, to help spread information about the 70x2020 Initiative, to encourage people to be screened and to advertise upcoming colorectal cancer screening and awareness events.

Coordinate the shared release of newsworthy information via the public affairs departments of 70x2020 partner organizations to print, radio, television and internet media organizations in Mississippi on a regular basis. Coordinate an annual media saturation campaign during colorectal cancer awareness month (March).

Use the National Colorectal Cancer Roundtable's 2015 "Colorectal Cancer Screening 80% by 2018 Communications Guidebook" to guide public communication intended for the unscreened populations in Mississippi. Use small media and one-on-one communication, such as through community health advisors, to directly reach health care consumers to increase screening, as recommended by the Community Guide.

Tactical plan for improved metrics via health data analytics

Accurate geocoded data are needed to assess statewide, regional and local progress towards the 70x2020 goal. Such data provide benchmarks for success and identify communities and regions which require additional CRC screening interventions. The Behavioral Risk Factor Surveillance System (BRFSS) is used nationally and is therefore useful for comparison of Mississippi to other states. However, more granular data are needed for this Initiative. The Mississippi Health Information Network (MS-HIN) may provide the best and most logical centralized health data analytics system for a sustainable post-2020 CRC screening, prevention and control program.

In recognition of the tremendous gap between the current BRFSS-derived data and the presumably ideal data provided by the MS-HIN, this tactical plan must employ a transitional approach which would, out of necessity, have incomplete data. In reality, not all organizations which own CRC-related health data may be willing to share their data, and the transitional process must accommodate and discuss any valid concerns of such organizations. To address the ongoing technical, legal and ethical challenges associated with CRC-related health data analytics, a 70x2020 Metrics Task Force shall be established.

The 70x2020 Metrics Task Force shall meet on a periodic basis, at least annually, to develop a functioning transitional health analytics system which can be used by any member of the 70x2020 Partnership. This system does not need to be created *de novo*, but may simply consist of access to one or more other health analytic systems currently in use. The 70x2020 Metrics Task Force should include members whose professional expertise allows them to represent one of the following areas:

- Ethical, legal and/or individual privacy issues;
- Cancer epidemiology and/or cancer registries;
- Health insurance providers and/or health insurance exchanges;
- Health medical database technology; and
- The Mississippi Health Information Network (MS-HIN).

The 70x2020 Metrics Task Force shall identify all relevant data sources which are readily available, define the barriers which hinder obtaining comprehensive CRC screening data throughout Mississippi, and investigate the approaches used in other states. The single highest priority shall be maintaining the confidentiality of individual protected health information (PHI).

Ideally, medical billing records from public and private health care insurance providers, including Medicare, Medicaid, Veterans Administration and private sector insurers, will be collected through a common "honest broker" system (a.k.a., a "data warehouse") to remove PHI from the data while using a secure records linkage to avoid duplication errors when multiple providers serve a common individual. Such an honest broker system would be able to provide information about the type of CRC screenings being used and also whether such screenings resulted in the removal of pre-cancerous polyps or early stage cancers.

An objective of this tactical plan is to avoid duplication of effort with the MS-HIN, which will be the logical home for the post-2020 transition to a sustainable CRC screening, prevention and control program.

Tactical plan to obtain mission-focused funding

Attaining the 70x2020 goal will require a range of resources which cost money. Generally speaking, funding agencies may support precisely defined projects if they address their missions. To obtain financial support to implement the various components of the 70x2020 Strategic Plan, the following tactical plan will be implemented.

Establish a central fund to accept donations from individuals, organizations, corporations and governmental agencies. The 70x2020 Colorectal Cancer Screening Initiative at UMMC Fund has been established within the University of Mississippi Medical Center's Office of Development. Disbursements from this fund by the UMMC Cancer Institute's associate director for cancer education require the authorization of the UMMC Cancer Institute's administrator and are subject to audit by UMMC, the state of Mississippi and other regulatory authorities. The stated purpose of this fund is: "This fund will pay for unrestricted UMMC activities in support of the 70x2020 Colorectal Cancer Screening Initiative, a statewide effort to ensure that at least 70 percent of Mississippians are up-to-date with recommended colorectal cancer screening by the year 2020. This fund will cover such UMMC activities as hosting meetings for the 70x2020 Partnership; supporting travel related to the 70x2020 goal and partnership development; creating and disseminating relevant scientific, medical and public health policy information; and similar activities relevant to colorectal cancer screening."

Create novel and imaginative funding mechanisms to support the efforts of individual partner organizations or of collaborative efforts. An example is the authorization and production of a new Mississippi specialty automobile license plate to promote colorectal cancer screening. The revenue from the sale of such plates will be used to sustain the statewide 70x2020 Partnership and the implementation of this strategic plan.

Identify relevant funding opportunities from government agencies, private foundations and professional societies which could support various elements of the 70x2020 strategic plan, and establish a projected funding deadline calendar. Align small clusters of 70x2020 partner organizations which complement each other's strengths for specific projects and facilitate the production of collaborative funding applications. Apply the expertise of experienced application writers and reviewers to improve funding applications through a pre-review process.

Submit collaborative funding proposals to the Patient-Centered Outcomes Research Institute (PCORI) to support community engagement projects and/or comparative effectiveness research on evidence-based interventions to increase colorectal cancer screening.

Submit collaborative funding proposals to the Agency for Healthcare Research and Quality for implementation research to develop, test and evaluate health service activities and to foster the application of existing knowledge for the control of colorectal cancer.

Coordinate efforts with the Mississippi State Department of Health to apply for funding from the U.S. Centers for Disease Control and Prevention to expand CRC screening and promote CRC prevention and control. This will be essential for a successful transition of sustainable effort after the year 2020.

Tactical plan for the 2020 transition

The goal of the 70x2020 Colorectal Cancer Screening Initiative is to ensure that at least 70 percent of all Mississippians are up-to-date with recommended colorectal cancer screening by the year 2020. At some point in the future, that goal will either be met or the year 2020 will have transpired, and at that time, there will be no need for the 70x2020 Partnership or this strategic plan. However, colorectal cancer will remain a major health concern for the residents of Mississippi, and a statewide effort to prevent and control colorectal cancer must continue. To continue significant and meaningful progress against colorectal cancer in Mississippi beyond the year 2020, the following tactical plan will be implemented.

Coordinate efforts with the Mississippi State Department of Health to promote a comprehensive colorectal cancer screening, prevention and control program.

Establish a legacy of educational resources for community organizations to continually raise consumer health literacy throughout Mississippi so that colorectal cancer prevention is a commonplace, common sense part of a healthy and active lifestyle.

Entrust Mississippi's health professional organizations to ensure that permanent, sustainable and systematic improvements in access to and delivery of preventive colorectal cancer screening and follow-up medical services become the expected norm throughout Mississippi.

Coordinate efforts with academic research centers, including the University of Mississippi Medical Center Cancer Institute, to develop translational research programs which will address as-yet unmet challenges posed by colorectal cancer, including issues surrounding the clinical recognition and effective treatment of aggressive colorectal cancer subtypes, the emergence of early onset colorectal cancer and the development of improved preventive colorectal cancer screening techniques.

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Colorectal Cancer Screening Initiative

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