## Alabama Colorectal Cancer Screening Landscape

**Alabama is the 9th Deadliest state for colorectal cancer in the U.S.**

<table>
<thead>
<tr>
<th>Screening Information</th>
<th>OF ALABAMANS AGES 50-64 ARE UP TO DATE ON SCREENING (2018 BRFSS data)</th>
<th>OF ALABAMANS AGES 65-75 ARE UP TO DATE ON SCREENING (2018 BRFSS data)</th>
<th>AVERAGE ANNUAL NUMBER OF NEW CASES AGE &lt;50 (National Cancer Institute 2012-2016)</th>
<th>AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+ (National Cancer Institute 2012-2016)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>64%</td>
<td>79.3%</td>
<td>293</td>
<td>2,219</td>
</tr>
</tbody>
</table>

**Does Statute Mention Age?** Yes: 50

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?** No

## What Does Alabama Statute Say about Colorectal Cancer?

### Policies Covered by State Statute

All group health benefit plans, policies, contracts, and certificates executed, delivered, issued for delivery, continued, or renewed in this state on or after August 1, 2004 shall offer, at the time of proposal, sale, or renewal of a policy subject to this chapter, to include colorectal cancer examinations within the coverage.

### Consumers Covered by State Statute

1. Colorectal cancer examinations for covered persons who are 50 years of age or older, or for covered persons who are less than 50 years of age and at high risk for colorectal cancer according to current American Cancer Society (ACS) colorectal cancer screening guidelines.

### Colorectal Cancer Screening Methods Covered by State Statute

1. “Colorectal Cancer Examinations” is defined in the statute to include examinations and laboratory test specified in the current ACS guidelines for colorectal cancer screening for asymptomatic individuals.

### More Information

<table>
<thead>
<tr>
<th>More Information</th>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>Lives enrolled in non-ERISA plans</th>
<th>Medicaid Expansion state?</th>
<th>Colorectal Cancer Control Program (CRCCP) grantee?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ACS</td>
<td>2,286,830</td>
<td>No</td>
<td>Yes; Link Here</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy
Alaska is the 12th Deadliest state for colorectal cancer in the U.S.

**Statute tied to ACS, USPSTF or other?**
ACS

**Lives enrolled in non-ERISA plans**
321,676

**Medicaid Expansion state?**
Yes

**Colorectal Cancer Control Program (CRCCP) grantee?**
No

**Screening Information**

<table>
<thead>
<tr>
<th>Ages</th>
<th>Of Alaskans Ages up to Date on Screening</th>
</tr>
</thead>
<tbody>
<tr>
<td>50-64</td>
<td>53.3% (2018 BRFSS data)</td>
</tr>
<tr>
<td>65-75</td>
<td>73.1% (2018 BRFSS data)</td>
</tr>
</tbody>
</table>

**Average Annual Number of New Cases**

<table>
<thead>
<tr>
<th>Age</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;50</td>
<td>37</td>
</tr>
<tr>
<td>50+</td>
<td>237</td>
</tr>
</tbody>
</table>

**Does Statute Mention Age?**
Yes: 50

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?**
No

**What Does Alaska Statute Say About Colorectal Cancer?**

**Policies Covered by State Statute**
Except for a fraternal benefit society, a health care insurer that offers, issues for delivery, delivers, or renews in this state a health care insurance plan shall provide coverage for the costs of colorectal cancer screening examinations and laboratory tests under the schedule described in (b) of this section. The coverage required by this section is subject to standard policy provisions applicable to other benefits, including deductible or copayment provisions.

**Consumers Covered by State Statute**
Coverage provided under this section applies to a covered individual who is:
1. at least 50 years of age; or
2. less than 50 years of age and at high risk for colorectal cancer

**Colorectal Cancer Screening Methods Covered by State Statute**
The minimum coverage required includes coverage for colorectal cancer examinations and laboratory tests specified in American Cancer Society guidelines for colorectal cancer screening of asymptomatic individuals. Coverage shall be provided for all colorectal screening examinations and tests that are administered at a frequency identified in the American Cancer Society guidelines for colorectal cancer. All screening options identified in (b) of this section shall be covered by the insurer, with the choice of option determined by the covered individual in consultation with a health care provider.

**More Information**

<table>
<thead>
<tr>
<th>Information</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statute tied to ACS, USPSTF or other?</td>
<td>ACS</td>
</tr>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>321,676</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at [FightCRC.org/Advocacy](http://FightCRC.org/Advocacy)
Arizona is the 42nd Deadliest state for colorectal cancer in the U.S.

**Summary**

Arizona is the only state without a colorectal cancer screening statute that does not mention age in its screening-related materials. It ranks in the bottom 10 nationally in CRC screening rates for ages 50 to 64. From 2016 to 2018, Arizona saw increases in screening rates of 2.6% among ages 50 to 64 and 2.5% among ages 65 to 75.

The Arizona Department of Health Services is a supporter of the national “80% in Every Community” initiative to prioritize improving colorectal cancer screening rates.

More details available here.

**Screening Information**

- **59.6%** of Arizonans ages 50-64 are up to date on screening (2018 BRFSS data)
- **76.4%** of Arizonans ages 65-75 are up to date on screening (2018 BRFSS data)
- **Average annual number of new cases age<50**
  - National Cancer Institute (2012-2016)
  - **248**
- **Average annual number of new cases age 50+**
  - National Cancer Institute (2012-2016)
  - **2,342**

**More Information**

<table>
<thead>
<tr>
<th></th>
<th>Colorectal cancer screening statute?</th>
<th>Lives enrolled in non-ERISA plans</th>
<th>Medicaid Expansion state?</th>
<th>Colorectal Cancer Control Program (CRCCP) grantee?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>3,185,592</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
Arkansas is the 5th Deadliest state for colorectal cancer in the U.S.

**Screening Information**

- **58.8%** of Arkansans ages 50-64 are up to date on screening (2018 BRFSS data)
- **77.7%** of Arkansans ages 65-75 are up to date on screening (2018 BRFSS data)
- **170** new cases age <50 (National Cancer Institute, 2012-2016)
- **1,366** new cases age 50+ (National Cancer Institute, 2012-2016)

**Does Statute Mention Age?**

**YES: 50**

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?**

**NO**

**What Does Arkansas Statute Say About Colorectal Cancer?**

**Policies Covered by State Statute**

A healthcare policy subject to this subchapter executed, delivered, issued for delivery, continued, or renewed in this state on or after August 1, 2005, shall include colorectal cancer examinations and laboratory tests within the healthcare policy’s coverage.

**Consumers Covered by State Statute**

1. Covered persons who are 50 years of age or older;
2. Covered persons who are less than 50 years of age and at high risk for colorectal cancer according to American Cancer Society colorectal cancer screening guidelines as they existed on January 1, 2005;
3. Covered persons experiencing symptoms of colorectal cancer as determined by a physician licensed under the Arkansas Medical Practices Act.

**Colorectal Cancer Screening Methods Covered by State Statute**

1. An annual fecal occult blood test utilizing the take-home multiple sample method, or an annual fecal immunochemical test in conjunction with a flexible sigmoidoscopy every five years;
2. A double-contrast barium enema every five years; or
3. A colonoscopy every 10 years; and
4. Any additional medically recognized screening tests for colorectal cancer required by the Director of the Department of Health, determined in consultation with appropriate healthcare organizations.

**More Information**

- Statute tied to ACS, USPSTF or other? Other
- Lives enrolled in non-ERISA plans 1,722,960
- Medicaid Expansion state? Yes
- Colorectal Cancer Control Program (CRCCP) grantee? Yes; Link Here

Find out how to take action in your state at [FightCRC.org/Advocacy](http://FightCRC.org/Advocacy)
California is the 40th Deadliest state for colorectal cancer in the U.S.

- 64.8% of Californians ages 50-64 are up to date on screening (2018 BRFSS data)
- 82.4% of Californians ages 65-75 are up to date on screening (2018 BRFSS data)
- 1,683 average annual number of new cases age <50
  National Cancer Institute (2012-2016)
- 12,775 average annual number of new cases age 50+
  National Cancer Institute (2012-2016)

**DOES STATUTE MENTION AGE?**
No

**DOES STATUTE WAIVE COST-SHARING FOR FOLLOW-UP COLONOSCOPY?**
No

**WHAT DOES CALIFORNIA STATUTE SAY ABOUT COLORECTAL CANCER?**

**POLICIES COVERED BY STATE STATUTE**
Every individual or group health care service plan contract, except for a specialized health care service plan contract, that is issued, amended, delivered, or renewed on or after July 1, 2000, shall be deemed to provide coverage for all generally medically accepted cancer screening tests, subject to all terms and conditions that would otherwise apply.

**COLORECTAL CANCER SCREENING METHODS COVERED BY STATE STATUTE**
All generally medically accepted cancer screening tests.

**MORE INFORMATION**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>USPSTF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>29,160,530</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>Yes; Link Here</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy
Colorado is the 48th Deadliest state for colorectal cancer in the U.S.

**Screening Information**

- **63.3%**
  - Of Coloradans ages 50-64 are up to date on screening
  - (2018 BRFSS data)
- **77.3%**
  - Of Coloradans ages 65-75 are up to date on screening
  - (2018 BRFSS data)
- **234**
  - Average annual number of new cases age <50
  - National Cancer Institute (2012-2016)
- **1,614**
  - Average annual number of new cases age 50+
  - National Cancer Institute (2012-2016)

**Policies Covered by State Statute**

- **A.** All individual and all group sickness and accident insurance policies, except supplemental policies covering a specified disease or other limited benefit, that are delivered or issued for delivery within the state by an entity subject to part 2 of this article;
- **B.** All individual and group health care service or indemnity contracts issued by an entity subject to part 3 or 4 of this article; and
- **C.** Any other individual or group health care coverage offered to residents of this state.

Insurers must provide coverage for the total cost of the preventive health care service specified in paragraph (B), which requires coverage in accordance with A or B recommendations of the task force.

**Consortium by State Statute**

In addition to covered persons eligible for colorectal cancer screening coverage in accordance with A or B recommendations of the task force, colorectal cancer screening coverage required by this subparagraph (V) shall also be provided to covered persons who are at high risk for colorectal cancer as determined by the provider.

**Colonial Cancer Screening Methods Covered by State Statute**

The coverage required by this subsection (18) must include preventive health care services for the following, in accordance with the A or B recommendations of the task force for the particular preventive health care service: (V) (A) Colorectal cancer screening coverage for tests for the early detection of colorectal cancer and adenomatous polyps.

**Does Statute Mention Age?**

**No**

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?**

**No**

**WHAT DOES COLORADO STATUTE SAY ABOUT COLORECTAL CANCER?**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>USPSTF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>2,716,853</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>Yes; [Link Here]</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at [FightCRC.org/Advocacy](http://FightCRC.org/Advocacy)

Last Updated: June 2020 | *Full Statute Available Here*
Connecticut is the 49th deadliest state for colorectal cancer in the U.S.

71.2% of Connecticuters ages 50-64 are up to date on screening (2018 BRFSS data)
80.6% of Connecticuters ages 65-75 are up to date on screening (2018 BRFSS data)

AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50
National Cancer Institute (2012-2016)
176

AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+
National Cancer Institute (2012-2016)
1,450

Does statute mention age? No
Does statute waive cost-sharing for follow-up colonoscopy? No

What does Connecticut statute say about colorectal cancer?

POLICIES COVERED BY STATE STATUTE
Each individual health insurance policy providing coverage of the type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469 delivered, issued for delivery, amended, renewed or continued in this state shall provide coverage for colorectal cancer screening.

No such policy shall impose: (1) a deductible for a procedure that a physician initially undertakes as a screening colonoscopy or screening sigmoidoscopy; or (2) a coinsurance, copayment, deductible or other out-of-pocket expense for any additional colonoscopy ordered in a policy year by a physician for the insured. These provisions shall not apply to a high deductible plan as that term is used in subsection (f) of section 38a-493.

CONSUMERS COVERED BY STATE STATUTE
In accordance with the recommendations established by the American Cancer Society, based on the ages, family histories and frequencies provided in the recommendations. Except as specified in subsection (b) of this section, benefits under this section shall be subject to the same terms and conditions applicable to all other benefits under such policies.

COLORECTAL CANCER SCREENING METHODS COVERED BY STATE STATUTE
Colorectal cancer screening including, but not limited to,
1. an annual fecal occult blood test, and
2. colonoscopy, flexible sigmoidoscopy or radiologic imaging, in accordance with the recommendations established by the American Cancer Society, based on the ages, family histories and frequencies provided in the recommendations.

Find out how to take action in your state at FightCRC.org/Advocacy

<table>
<thead>
<tr>
<th>MORE INFORMATION</th>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>Lives enrolled in non-ERISA plans</th>
<th>Medicaid Expansion state?</th>
<th>Colorectal Cancer Control Program (CRCCP) grantee?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ACS</td>
<td>1,789,215</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Last Updated: June 2020 | *Full Statute Available Here
Delaware is the 34th Deadliest state for colorectal cancer in the U.S.

**Screening Information**

- **67.5%** of Delawareans ages 50-64 are up to date on screening (2018 BRFSS data)
- **80.5%** of Delawareans ages 65-75 are up to date on screening (2018 BRFSS data)
- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50**
  - National Cancer Institute (2012-2016)
- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+**
  - National Cancer Institute (2012-2016)

**Does Statute Mention Age?** Yes; 50

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?** No

**What Does Delaware Statute Say About Colorectal Cancer?**

**Policies Covered by State Statute**

All group and blanket health insurance policies which are delivered or issued for delivery or renewed in this State on or after January 1, 2001, by any health insurer or health service corporation shall provide coverage for colorectal cancer screening. Every individual health, sickness or accident insurance policy contract or certificate which is delivered or issued for delivery in this State by any health insurer, health service corporation or health maintenance organization shall provide coverage for colorectal cancer screening under any such policy, contract or plan delivered, issued for delivery, or renewed in this State on or after January 1, 2001.

**Consumers Covered by State Statute**

For persons 50 years of age or older screening

**Colorectal Cancer Screening Methods Covered by State Statute**

Screening with an annual fecal occult blood test, flexible sigmoidoscopy or colonoscopy, or in appropriate circumstances radiologic imaging or other screening modalities, shall be provided as determined by the Secretary of Health and Social Services of this State after consideration of recommendations of the Delaware Cancer Consortium and the most recently published recommendations established by the American College of Gastroenterology, the American Cancer Society, the United States Preventive Services Task Force for the ages, family histories and frequencies referenced in such recommendations and deemed appropriate by the attending physician.

**More Information**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>ACS &amp; USPSTF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>387,526</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>Yes; Link Here</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy

Last Updated: June 2020 | *Full Statute Available Here*
**District of Columbia**

**Colorectal Cancer Screening Landscape**

<table>
<thead>
<tr>
<th>Screening Information</th>
<th>68.7%</th>
<th>79.9%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>OF D.C. RESIDENTS AGES 50-64 ARE UP TO DATE ON SCREENING</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2018 BRFSS data)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>OF D.C. RESIDENTS AGES 65-75 ARE UP TO DATE ON SCREENING</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2018 BRFSS data)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>AVERAGE ANNUAL NUMBER OF NEW CASES AGE &lt;50</strong></td>
<td>40</td>
<td>208</td>
</tr>
<tr>
<td>National Cancer Institute (2012-2016)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National Cancer Institute (2012-2016)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Does Statute Mention Age?**

**NO**

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?**

**NO**

**What Does District of Columbia Statute Say About Colorectal Cancer?**

**Policies Covered by Statute**

Every individual and group health insurance policy or service, including Medicaid, shall provide coverage for colorectal cancer screening for policyholders residing in the District of Columbia.

As American Cancer Society colorectal cancer screening guidelines are updated, every individual and group health insurance policy of service, including Medicaid, shall update their colorectal cancer screening benefits to comply with the American Cancer Society guidelines.

**Colorectal Cancer Screening Methods Covered by Statute**

The screening shall be in compliance with American Cancer Society colorectal cancer screening guidelines.

**More Information**

<table>
<thead>
<tr>
<th></th>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>Lives enrolled in non-ERISA plans</th>
<th>Medicaid Expansion state?</th>
<th>Colorectal Cancer Control Program (CRCCP) grantee?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ACS</td>
<td>1,108,729</td>
<td>Yes</td>
<td>Yes; <a href="#">Link Here</a></td>
</tr>
</tbody>
</table>
Florida is the 37th Deadliest state for colorectal cancer in the U.S.

Summary

Florida’s Colorectal Cancer Control Program has implemented Evidence-Based Interventions (EBIs) among persons 50 to 75 years of age in an effort to increase colorectal cancer screening rates. Among the EBIs the state has developed in partnership with health systems include provider assessment and feedback, provider reminders, client reminders, and reducing structural barriers.

From 2016 to 2018, Florida saw a 2.8% increase in screening rates among ages 50 to 64 and ages 65 to 75. It has the nation’s second-widest gap in screening rates between ages 65 to 75 (82.9%) and ages 50 to 64 (61.6%), a difference of more than 21 percent.

More details available here.

<table>
<thead>
<tr>
<th>More Information</th>
<th>Colorectal cancer screening statute?</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lives enrolled in non-ERISA plans</td>
<td>10,842,289</td>
</tr>
<tr>
<td></td>
<td>Medicaid Expansion state?</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>
Georgia is the 17th deadliest state for colorectal cancer in the U.S.

**Screening Information**

- **61.7%** of Georgians ages 50-64 are up to date on screening (2018 BRFSS data)
- **80.8%** of Georgians ages 65-75 are up to date on screening (2018 BRFSS data)
- **565** average annual number of new cases age <50 (National Cancer Institute, 2012-2016)
- **3,794** average annual number of new cases age 50+ (National Cancer Institute, 2012-2016)

**Does statute mention age?**

- No

**Does statute waive cost-sharing for follow-up colonoscopy?**

- No

**What Does Georgia Statute Say About Colorectal Cancer?**

**Policies covered by state statute**

“Health benefit policy” means any individual or group plan, policy, or contract for health care services issued, delivered, issued for delivery, executed, or renewed by an insurer in this state on or after July 1, 2002, including, but not limited to, those contracts executed by the Department of Community Health pursuant to paragraph (1) of subsection (d) of Code Section 31-2-4. The term “health benefit policy” does not include the following limited benefit insurance policies: accident only, CHAMPUS supplement, dental, disability income, fixed indemnity, long-term care, Medicare supplement, specified disease, vision, and nonrenewable individual policies written for a period of less than six months.

**Colorectal cancer screening methods covered by state statute**

Every health benefit policy shall provide coverage for colorectal cancer screening, examinations, and laboratory tests in accordance with the most recently published guidelines and recommendations established by the American Cancer Society, in consultation with the American College of Gastroenterology and the American College of Radiology, for the ages, family histories, and frequencies referenced in such guidelines and recommendations and deemed appropriate by the attending physician after conferring with the patient.

**More information**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>ACS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>4,531,695</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>No</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy
Hawaii is the 43rd deadliest state for colorectal cancer in the U.S.

**Screening Information**

- Of Hawaiians ages 50-64 are up to date on screening (2018 BRFSS data)
- 70.2%

- Of Hawaiians ages 65-75 are up to date on screening (2018 BRFSS data)
- 81%

- Average annual number of new cases age <50
  - National Cancer Institute (2012-2016)
  - 79

- Average annual number of new cases age 50+
  - National Cancer Institute (2012-2016)
  - 638

**Do statute mention age?**

- No

**Does statute waive cost-sharing for follow-up colonoscopy?**

- No

**What does Hawaii statute say about colorectal cancer?**

**Policies covered by state statute**

Each policy of accident and health or sickness insurance providing coverage for health care, except for policies that only provide coverage for specified diseases or other limited benefit coverage, shall provide coverage for colorectal cancer screening by all A and B grade screening modalities as recommended by the United States Preventive Services Task Force.

**Colorectal cancer screening methods covered by state statute**

Provide coverage for colorectal-cancer screening by all A and B grade screening modalities as recommended by the United States Preventive Services Task Force. Beginning March 1, 2011, all health insurance providers in Hawaii shall inform their insured about the risk associated with undiagnosed colorectal cancer and encourage the insured to consult with the insured’s physician about available screening options.

**More information**

- Statute tied to ACS, USPSTF or other? | USPSTF
- Lives enrolled in non-ERISA plans | 1,282,207
- Medicaid Expansion state? | Yes
- Colorectal Cancer Control Program (CRCCP) grantee? | No

Find out how to take action in your state at FightCRC.org/Advocacy

Last Updated: June 2020 | *Full Statute Available Here*
Idaho is the 39th DEADLIEST state for colorectal cancer in the U.S.

60.3% of Idahoans ages 50-64 are up to date on screening (2018 BRFSS data)

75.8% of Idahoans ages 65-75 are up to date on screening (2018 BRFSS data)

AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50
National Cancer Institute (2012-2016)

67

AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+
National Cancer Institute (2012-2016)

566

SUMMARY
Idaho ranks in the bottom 12 nationally in CRC screening rates for ages 50 to 64 and 65 to 75. However, it did see significant increases in screening rates among both age groups from 2016 to 2018. Idaho’s screening rates among ages 50 to 64 increased by 4.1% and ages 65 to 75 by 3.2%, both among the states with the 10 biggest percentage jumps nationally in each age group.

The Idaho Department of Health and Welfare provides online training to health care providers in an effort to increase knowledge about colorectal cancer in Idaho and boost screening rates among patients. The training consists of a 3-part video series divided into the following courses:

- Importance and Impact of Colorectal Cancer Screening
- Utilize All Screening Options for Idahoans
- Increasing Colorectal Cancer Screening Rates in Idaho through Practice Improvement

More details available here.

### WHAT IS THE STATE OF IDAHO DOING ABOUT COLORECTAL CANCER SCREENING?

<table>
<thead>
<tr>
<th>Screening Information</th>
<th>Colorectal cancer screening statute?</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy

Last Updated: June 2020 | Program Details Here
ILLINOIS
COLORECTAL CANCER SCREENING LANDSCAPE

Illinois is the 15th Deadliest state for colorectal cancer in the U.S.

62.6%
600
OF ILLINOISANS AGES 50-64 ARE UP TO DATE ON SCREENING
(2018 BRFSS data)

74.8%
5,653
OF ILLINOISANS AGES 65-75 ARE UP TO DATE ON SCREENING
(2018 BRFSS data)

AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50
National Cancer Institute (2012-2016)

AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+
National Cancer Institute (2012-2016)

DOES STATUTE MENTION AGE? NO
DOES STATUTE WAIVE COST-SHARING FOR FOLLOW-UP COLONOSCOPY? NO

WHAT DOES ILLINOIS STATUTE SAY ABOUT COLORECTAL CANCER?

POLICIES COVERED BY STATE STATUTE*

An individual or group policy of accident and health insurance or a managed care plan that is amended, delivered, issued, or renewed on or after the effective date of this amendatory Act of the 93rd General Assembly that provides coverage to a resident of this State must provide benefits or coverage for all colorectal cancer examinations and laboratory tests for colorectal cancer as prescribed by a physician, in accordance with the published American Cancer Society guidelines on colorectal cancer screening or other existing colorectal cancer screening guidelines issued by nationally recognized professional medical societies or federal government agencies, including the National Cancer Institute, the Centers for Disease Control and Prevention, and the American College of Gastroenterology.

Coverage required under this Section may not impose any deductible, coinsurance, waiting period, or other cost-sharing limitation that is greater than that required for other coverage under the policy.

Details on Department of Public Health’s Colorectal Cancer Screening and Treatment Pilot Program available here.

MORE INFORMATION

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>ACS</th>
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<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>6,132,132</td>
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<td>Medicaid Expansion state?</td>
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<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>Yes; Link Here</td>
</tr>
</tbody>
</table>
Indiana is the 13th Deadliest state for colorectal cancer in the U.S.

**Screening Information**

- **Of Indianans Ages 50-64 are up to date on screening** (2018 BRFSS data): 62.2%
- **Of Indianans Ages 65-75 are up to date on screening** (2018 BRFSS data): 77.3%
- **Average Annual Number of New Cases Age <50** (National Cancer Institute, 2012-2016): 323
- **Average Annual Number of New Cases Age 50+** (National Cancer Institute, 2012-2016): 2,868

**Does Statute Mention Age?**

- Yes; 45

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?**

- No

**What Does Indiana Statute Say About Colorectal Cancer?**

**Policies Covered by State Statute**

Individuals covered under a self-insurance program established under section 7(b) of this chapter to provide group health coverage; or entitled to services under a contract with a health maintenance organization (as defined in IC 27-13-1-19) that is entered into or renewed under section 7(c) of this chapter.

Self-insurance program established under section 7(b) of this chapter to provide health care coverage; or contract with a health maintenance organization that is entered into or renewed under section 7(c) of this chapter; must provide coverage for colorectal cancer examinations and laboratory tests for cancer for any nonsymptomatic covered individual.

**Consumers Covered by State Statute**

For a covered individual who is:

1. At least 45 years of age; or
2. Less than 45 years of age and at high risk for colorectal cancer;

A covered individual may not be required to pay an additional deductible or coinsurance for the colorectal cancer examination and laboratory testing benefit required by this section that is greater than an annual deductible or coinsurance established for similar benefits under the self-insurance program or contract with a health maintenance organization under which the covered individual is covered or entitled to services.

**More Information**

- Statute tied to ACS, USPSTF or other? Other
- Lives enrolled in non-ERISA plans: 2,445,269
- Medicaid Expansion state? Yes
- Colorectal Cancer Control Program (CRCCP) grantee? No

Find out how to take action in your state at FightCRC.org/Advocacy
**SUMMARY**

The Iowa Get Screened (IGS) Colorectal Cancer Program is administered by the Iowa Department of Public Health. The goal of the IGS program is to reduce the incidence, mortality and prevalence of colorectal cancer in Iowa by increasing the number of men and women who receive colorectal cancer screenings. Through the program, fecal immunochemical tests (FITs) and colonoscopies are provided to eligible Iowans. Along with providing screenings, the program also facilitates supportive services and referral for diagnosis and treatment to Iowans with abnormal screening results. Iowans who are eligible to enter the program must be 50 to 75 years of age, be underinsured or uninsured, have incomes of up to 300 percent of the federal poverty level (FPL) and have an average or increased risk for developing colorectal cancer.

Iowa saw a greater than 2% increase in screening rates from 2016 to 2018 among ages 50 to 64 and ages 65 to 75.

[More details available here.](#)
Kansas is the 20th Deadliest state for colorectal cancer in the U.S.

**Summary**

In the Kansas Department of Health and Environment’s 2017-2021 Kansas Cancer Prevention and Control Plan, the colorectal cancer objective is to increase screening rates in five years to 85% in the state. Kansas is focused on seven strategies to achieve this goal:

1. Provide technical assistance to help providers more easily track screening rates.
2. Develop and provide free professional education for health care providers on strategies for increasing clinic screening rates.
3. Identify provider preferences for health systems change strategies that would be most effective for increasing their CRC screening rates.
4. Expand FluFit (providing CRC screening kits at time of flu shots for age-appropriate patients) in rural areas or areas with larger populations of people who are Hispanic, or who have lower income or educational levels.
5. Develop and implement a social media campaign to promote CRC screening.
6. Work with state managed care providers to increase CRC screening among newly insured or uninsured patients.
7. Utilize community health workers to navigate low income men and women into CRC screening.

More details available here.

**Screening Information**

- 61.6% of Kansans ages 50-64 are up to date on screening (2018 BRFSS data)
- 76.1% of Kansans ages 65-75 are up to date on screening (2018 BRFSS data)
- 143 average annual number of new cases age <50 (National Cancer Institute, 2012-2016)
- 1,172 average annual number of new cases age 50+ (National Cancer Institute, 2012-2016)

**Table**

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<tbody>
<tr>
<td></td>
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<td>1,202,858</td>
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<td>No</td>
</tr>
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Find out how to take action in your state at FightCRC.org/Advocacy
Kentucky is the 6th Deadliest state for colorectal cancer in the U.S.

Screening Information

- 64% of Kentuckians ages 50-64 are up to date on screening (2018 BRFSS data)
- 78.6% of Kentuckians ages 65-75 are up to date on screening (2018 BRFSS data)
- 285 average annual number of new cases age <50 (National Cancer Institute 2012-2016)
- 2,247 average annual number of new cases age 50+ (National Cancer Institute 2012-2016)

Does Statute Mention Age? Yes; 45

Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy? Yes

What Does Kentucky Statute Say About Colorectal Cancer?

Policies Covered by State Statute*

A health benefit plan issued or renewed on or after January 1, 2016, shall provide coverage for all colorectal cancer examinations and laboratory tests specified in the most recent version of the American Cancer Society guidelines for complete colorectal cancer screening of asymptomatic individuals as follows.

Coverage required by this section shall not be subject to a deductible, coinsurance, or any other cost-sharing requirements for services received from participating providers under the health benefit plan.

Consumers Covered by State Statute*

The covered individual shall be:

1. 45 years of age or older; or
2. Less than 45 years of age and at high risk for colorectal cancer according to the most recent version of the American Cancer Society guidelines for complete colorectal cancer screening.

Colorectal Cancer Screening Methods Covered by State Statute*

Coverage or benefits shall be provided for all colorectal cancer examinations and laboratory tests that are administered at a frequency identified in the most recent version of the American Cancer Society guidelines for colorectal cancer screening.

More Information

| Statute tied to ACS, USPSTF or other? | ACS |
| Lives enrolled in non-ERISA plans | 2,198,803 |
| Medicaid Expansion state? | Yes |
| Colorectal Cancer Control Program (CRCCP) grantee? | Yes; Link Here |

Find out how to take action in your state at FightCRC.org/Advocacy

Last Updated: June 2020 | *Full Statute Available Here
Louisiana is the 4th DEADLIEST state for colorectal cancer in the U.S.

64.4% of Louisianans ages 50-64 are up to date on screening (2018 BRFSS data)

77.3% of Louisianans ages 65-75 are up to date on screening (2018 BRFSS data)

256 average annual number of new cases age <50 (National Cancer Institute 2012-2016)

2,108 average annual number of new cases age 50+ (National Cancer Institute 2012-2016)

WHAT DOES LOUISIANA STATUTE SAY ABOUT COLORECTAL CANCER?

POLICIES COVERED BY STATE STATUTE

Any health coverage plan specified in Subsection C of this Section which is issued for delivery, delivered, renewed, or otherwise contracted for in this state on or after January 1, 2006, shall provide coverage for routine colorectal cancer screening.

COLORECTAL CANCER SCREENING METHODS COVERED BY STATE STATUTE

As used in this Section, “routine colorectal cancer screening” shall mean a fecal occult blood test, flexible sigmoidoscopy, or colonoscopy provided in accordance with the most recently published recommendations established by the American College of Gastroenterology, in consultation with the American Cancer Society, for the ages, family histories, and frequencies referenced in such recommendations. “Routine colorectal cancer screening” shall not mean services otherwise excluded from coverage because they are deemed by a health coverage plan to be experimental or investigational.

As used in this Section, “health coverage plan” shall mean any hospital, health, or medical expense insurance policy, hospital or medical service contract, employee welfare benefit plan, contract or agreement with a health maintenance organization or a preferred provider organization, health and accident insurance policy, or any other insurance contract of this type, including a group insurance plan, a self-insurance plan, and the Office of Group Benefits programs.

Find out how to take action in your state at FightCRC.org/Advocacy
Maine is the 38TH DEADLIEST state for colorectal cancer in the U.S.

**Screening Information**

- **OF MAINERS AGES 50-64 ARE UP TO DATE ON SCREENING**
  - 70.4%
  - (2018 BRFSS data)

- **OF MAINERS AGES 65-75 ARE UP TO DATE ON SCREENING**
  - 81.9%
  - (2018 BRFSS data)

- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50**
  - 64
  - National Cancer Institute (2012-2016)

- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+**
  - 618
  - National Cancer Institute (2012-2016)

**Does Statute Mention Age?**

- **YES; 45**

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?**

- **YES**

**What Does Maine Statute Say About Colorectal Cancer?**

**Policies Covered by State Statute**

For the purposes of this section, “colorectal cancer screening” means all colorectal cancer examinations and laboratory tests recommended by a health care provider in accordance with the most recently published colorectal cancer screening guidelines of a national cancer society.

If a colonoscopy is recommended by a health care provider as the colorectal cancer screening test in accordance with this section and a lesion is discovered and removed during that colonoscopy, the health care provider must bill the insurance company for a screening colonoscopy as the primary procedure.

**Consumers Covered by State Statute**

All individual health insurance policies and contracts must provide coverage for colorectal cancer screening for asymptomatic individuals who are:

1. At average risk for colorectal cancer according to the most recently published colorectal cancer screening guidelines of a national cancer society; or
2. At high risk for colorectal cancer.

**Colorectal Cancer Screening Methods Covered by State Statute**

All colorectal cancer examinations and laboratory tests recommended by a health care provider in accordance with the most recently published colorectal cancer screening guidelines of a national cancer society.

<table>
<thead>
<tr>
<th>More Information</th>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>Lives enrolled in non-ERISA plans</th>
<th>Medicaid Expansion state?</th>
<th>Colorectal Cancer Control Program (CRCCP) grantee?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Other</td>
<td>686,258</td>
<td>Yes</td>
<td>No</td>
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Find out how to take action in your state at FightCRC.org/Advocacy
**MARYLAND**

**COLORECTAL CANCER SCREENING LANDSCAPE**

Maryland is the 26th DEADLIEST state for colorectal cancer in the U.S.

<table>
<thead>
<tr>
<th>Screening Information</th>
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</thead>
<tbody>
<tr>
<td>OF MARYLANDERS AGES 50-64 ARE UP TO DATE ON SCREENING</td>
</tr>
<tr>
<td>(2018 BRFSS data)</td>
</tr>
<tr>
<td>OF MARYLANDERS AGES 65-75 ARE UP TO DATE ON SCREENING</td>
</tr>
<tr>
<td>(2018 BRFSS data)</td>
</tr>
<tr>
<td>AVERAGE ANNUAL NUMBER OF NEW CASES AGE &lt;50</td>
</tr>
<tr>
<td>National Cancer Institute (2012-2016)</td>
</tr>
<tr>
<td>AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+</td>
</tr>
<tr>
<td>National Cancer Institute (2012-2016)</td>
</tr>
</tbody>
</table>

| Does Statute Mention Age? | No | Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy? | No |

**WHAT DOES MARYLAND STATUTE SAY ABOUT COLORECTAL CANCER?**

**Policies Covered by State Statute**

Insurers and nonprofit health service plans that provide hospital, medical, or surgical benefits to individuals or groups on an expense-incurred basis and HMOs that provide hospital, medical, or surgical benefits to individuals or groups.

Subject to paragraph (2) of this subsection, the coverage required under this section may be subject to a copayment or coinsurance requirement or deductible that an entity subject to this section imposes for similar coverages under the same policy or contract.

**Colorectal Cancer Screening Methods Covered by State Statute**

An entity subject to this section shall provide coverage for colorectal cancer screening in accordance with the latest screening guidelines issued by the American Cancer Society.

| Statute tied to ACS, USPSTF or other? | ACS |
| Lives enrolled in non-ERISA plans | 3,071,698 |
| Medicaid Expansion state? | Yes |
| Colorectal Cancer Control Program (CRCCP) grantee? | Yes; Link Here |

**Find out how to take action in your state at**

FightCRC.org/Advocacy

Last Updated: June 2020 | *Full Statute Available Here*
Massachusetts is the 47th Deadliest state for colorectal cancer in the U.S.

**Screening Information**

- **72.1%** of Bay Staters ages 50-64 are up to date on screening (2018 BRFSS data)
- **84.6%** of Bay Staters ages 65-75 are up to date on screening (2018 BRFSS data)
- **336** average annual number of new cases age <50
  - National Cancer Institute (2012-2016)
- **2,484** average annual number of new cases age 50+
  - National Cancer Institute (2012-2016)

**Summary**

Massachusetts is one of just two states that ranks in the top five for CRC screening rates among ages 50 to 64 and 65 to 75. Its 72.1% screening rate among ages 50 to 64 ranks 1st, and its 84.6% screening rate among adults 65-75 is 2nd.

According to the Massachusetts Department of Public Health, colorectal cancer is the third-leading cause of cancer death in Massachusetts. While the Massachusetts Department of Public Health does recommend at-home stool tests or colonoscopy for screening, it also encourages patients to talk to their health care provider about the best test for them.

More details available here.

**More Information**

| | 
|----------------|----------------|
| **Colorectal cancer screening statute?** | No |
| **Lives enrolled in non-ERISA plans** | 3,989,369 |
| **Medicaid Expansion state?** | Yes |
| **Colorectal Cancer Control Program (CRCCP) grantee?** | Yes; Link Here |

Find out how to take action in your state at FightCRC.org/Advocacy
Michigan is the 25th deadliest state for colorectal cancer in the U.S.

Last Updated: June 2020 | *Program Details Here

Michigan is the 25th deadliest state for colorectal cancer in the U.S.

**WHAT IS THE STATE OF MICHIGAN DOING ABOUT COLORECTAL CANCER SCREENING?**

**SUMMARY**
While Michigan does not have a state mandate for CRC screening, it is one of six states in which the CDC’s Colorectal Cancer Control Program (CRCCP) provides direct screening services. The Michigan Colorectal Cancer Early Detection Program provides colorectal cancer screening services in limited areas to eligible men and women:

- Aged 50-64 years
- Low income (<= 250% of the Federal Poverty Level)
- Who have no symptoms
- Who are underinsured or uninsured

The Michigan Department of Health and Human Services has developed a Colorectal Cancer Navigation guide to utilizing evidence-based strategies in colorectal cancer screening. The intended outcome is to disseminate evidence-based strategies and interventions which could be implemented by providers to increase colorectal cancer screening rates.

Michigan ranked in the top 10 nationally in screening rate increases among ages 50 to 64 (+4.1%) and ages 65 to 75 (+2.9%) from 2016 to 2018.

More details available here.

**MORE INFORMATION**

| Colorectal cancer screening statute? | No |
| Lives enrolled in non-ERISA plans   | 5,564,258 |
| Medicaid Expansion state?           | Yes |
| Colorectal Cancer Control Program (CRCCP) grantee? | Yes; Link Here |
Minnesota is the 45th Deadliest state for colorectal cancer in the U.S.

68.8% of Minnesotans ages 50-64 are up to date on screening (2018 BRFSS data)
81.3%
258
2,103

Of Minnesotans ages 65-75 are up to date on screening (2018 BRFSS data)

Average annual number of new cases age <50
National Cancer Institute (2012-2016)
258

Average annual number of new cases age 50+
National Cancer Institute (2012-2016)
2,103

Does statute mention age? No
Does statute waive cost-sharing for follow-up colonoscopy? No

What does Minnesota statute say about colorectal cancer?

Policies covered by state statute
Every policy, plan, certificate, or contract referred to in subdivision 1 that provides coverage to a Minnesota resident must provide coverage for routine screening procedures for cancer and the office or facility visit, including mammograms, surveillance tests for ovarian cancer for women who are at risk for ovarian cancer as defined in subdivision 3, pap smears, and colorectal screening tests for men and women, when ordered or provided by a physician in accordance with the standard practice of medicine.

Statute tied to ACS, USPSTF or other? None
Lives enrolled in non-ERISA plans 2,518,936
Medicaid Expansion state? Yes
Colorectal Cancer Control Program (CRCCP) grantee? Yes; Link Here

Find out how to take action in your state at FightCRC.org/Advocacy

Last Updated: June 2020 | *Full Statute Available Here
**SUMMARY**

The Mississippi State Department of Health highlights personal experiences of health care providers and patients through videos on its website to help educate the public on the importance of CRC screening and early detection. Mississippi ranks in the bottom 10 nationally in CRC screening rates for ages 50 to 64 and 65 to 75.

The Department of Health recommends the following options for CRC screening:

- Have a Fecal Occult Blood Test (FOBT) annually.
- Have a sigmoidoscopy every five years, a colonoscopy or double contrast barium enema every five to 10 years. Have all non-cancerous polyps removed to help prevent colorectal cancer before it starts.
- Have a digital rectal exam every five to 10 years at the time of each screening sigmoidoscopy, colonoscopy or barium enema.
- If you have a personal or family history of colorectal cancer, benign colorectal polyps, inflammatory bowel disease, or breast, ovarian or endometrial cancer, talk to your health care professional about earlier and more frequent screening.

More details available here.

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**MORE INFORMATION**

<table>
<thead>
<tr>
<th>Statute</th>
<th>Lives enrolled in non-ERISA plans</th>
<th>Medicaid Expansion state</th>
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<td>1,302,493</td>
<td>No</td>
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Find out how to take action in your state at FightCRC.org/Advocacy

Last Updated: June 2020 | *Program Details Here*
MISSOURI
COLORECTAL CANCER SCREENING LANDSCAPE

Missouri is the 18TH DEADLIEST state for colorectal cancer in the U.S.

<table>
<thead>
<tr>
<th>SCREENING INFORMATION</th>
<th>63.7%</th>
<th>79.8%</th>
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</thead>
<tbody>
<tr>
<td>OF MISSOURIANS AGES 50-64 ARE UP TO DATE ON SCREENING</td>
<td>(2018 BRFSS data)</td>
<td></td>
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<tr>
<td>OF MISSOURIANS AGES 65-75 ARE UP TO DATE ON SCREENING</td>
<td>(2018 BRFSS data)</td>
<td></td>
</tr>
<tr>
<td>AVERAGE ANNUAL NUMBER OF NEW CASES AGE &lt;50</td>
<td>National Cancer Institute (2012-2016)</td>
<td>300</td>
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<tr>
<td>AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+</td>
<td>National Cancer Institute (2012-2016)</td>
<td>2,660</td>
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<table>
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<tr>
<th>DOES STATUTE MENTION AGE?</th>
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<tbody>
<tr>
<td>DOES STATUTE WAIVE COST-SHARING FOR FOLLOW-UP COLONOSCOPY?</td>
<td>NO</td>
</tr>
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</table>

WHAT DOES MISSOURI STATUTE SAY ABOUT COLORECTAL CANCER?

POLICIES COVERED BY STATE STATUTE*
All individual and group health insurance policies providing coverage on an expense-incurred basis, individual and group service or indemnity type contracts issued by a nonprofit corporation, individual and group service contracts issued by a health maintenance organization, all self-insured group arrangements to the extent not preempted by federal law and all managed health care delivery entities of any type or description, that are delivered, issued for delivery, continued or renewed on or after August 28, 1999, and providing coverage to any resident of this state shall provide benefits or coverage for colorectal cancer screening.

COLORECTAL CANCER SCREENING METHODS COVERED BY STATE STATUTE*
A colorectal cancer examination and laboratory tests for cancer for any nonsymptomatic person covered under such policy or contract, in accordance with the current American Cancer Society guidelines.

Coverage and benefits related to the examinations and tests as required by this section shall be at least as favorable and subject to the same dollar limits, deductible, and co-payments as other covered benefits or services.

<table>
<thead>
<tr>
<th>MORE INFORMATION</th>
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<td>Lives enrolled in non-ERISA plans</td>
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</tr>
<tr>
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<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy

Last Updated: June 2020 | *Full Statute Available Here
Montana is the 30th Deadliest state for colorectal cancer in the U.S.

55.3% of Montanans ages 50-64 are up to date on screening (2018 BRFSS data)

73.6% of Montanans ages 65-75 are up to date on screening (2018 BRFSS data)

AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50
National Cancer Institute (2012-2016)

44

AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+
National Cancer Institute (2012-2016)

447

WHAT IS THE STATE OF MONTANA DOING ABOUT COLORECTAL CANCER SCREENING?

SUMMARY
In 2014, the Montana Cancer Coalition released its Comprehensive Cancer Control Plan for 2016-2021. Among its objectives is to increase screening for CRC to 80% by 2021 through the following strategies:

1. Promote screening through culturally appropriate education and health equity approaches using one-on-one education, small media, and working directly with target populations.
2. Educate providers, Indian Health Service and Tribal Health on screening guidelines, insurance coverage, referrals, state programs, and access barriers.
3. Advocate for policy and practice changes within healthcare systems.

Montana ranks in the bottom 10 nationally in CRC screening rates for ages 50 to 64 and 65 to 75, but did see increases of at least 1% among both age groups from 2016 to 2018.

More details available here.

<table>
<thead>
<tr>
<th>MORE INFORMATION</th>
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<tr>
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<td>Lives enrolled in non-ERISA plans</td>
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<td></td>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>Yes; Link Here</td>
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Find out how to take action in your state at FightCRC.org/Advocacy
Nebraska is the 16TH DEADLIEST state for colorectal cancer in the U.S.

<table>
<thead>
<tr>
<th>Screening Information</th>
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<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
</tr>
<tr>
<td>Medicaid Expansion state</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee</td>
</tr>
</tbody>
</table>

**POLICIES COVERED BY STATE STATUTE**

Any individual or group sickness and accident insurance policy, certificate, or subscriber contract delivered, issued for delivery, or renewed in this state and any hospital, medical, or surgical expense-incurred policy, except for short-term major medical policies of six months or less duration and policies that provide coverage for a specified disease or other limited-benefit coverage, and (b) any self-funded employee benefit plan to the extent not preempted by federal law shall include screening coverage for a colorectal cancer examination and laboratory tests.

**CONSUMERS COVERED BY STATE STATUTE**

Any nonsymptomatic person 50 years of age and older covered under such policy, certificate, contract, or plan.

**COLORECTAL CANCER SCREENING METHODS COVERED BY STATE STATUTE**

Such screening coverage shall include a maximum of one screening fecal occult blood test annually and a flexible sigmoidoscopy every five years, a colonoscopy every ten years, or a barium enema every five to ten years, or any combination, or the most reliable, medically recognized screening test available. The screenings selected shall be as deemed appropriate by a health care provider and the patient.

**WHAT DOES NEBRASKA STATUTE SAY ABOUT COLORECTAL CANCER?**

- DOES STATUTE MENTION AGE? YES; 50
- DOES STATUTE WAIVE COST-SHARING FOR FOLLOW-UP COLONOSCOPY? NO

**SCREENING INFORMATION**

- OF NEBRASKANS AGES 50-64 ARE UP TO DATE ON SCREENING
  (2018 BRFSS data)
  - 63.1%
- OF NEBRASKANS AGES 65-75 ARE UP TO DATE ON SCREENING
  (2018 BRFSS data)
  - 76.5%
- AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50
  National Cancer Institute (2012-2016)
  - 90
- AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+
  National Cancer Institute (2012-2016)
  - 825

**MORE INFORMATION**

| Statute tied to ACS, USPSTF or other? | None |
| Lives enrolled in non-ERISA plans | 693,393 |
| Medicaid Expansion state? | Yes |
| Colorectal Cancer Control Program (CRCCP) grantee? | No |

Find out how to take action in your state at FightCRC.org/Advocacy
Nevada is the 7th deadliest state for colorectal cancer in the U.S.

### Screening Information

<table>
<thead>
<tr>
<th>Category</th>
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<tbody>
<tr>
<td>of Nevadans Ages 50-64 Are Up to Date on Screening</td>
<td>53.8%</td>
<td>(2018 BRFSS data)</td>
</tr>
<tr>
<td>of Nevadans Ages 65-75 Are Up to Date on Screening</td>
<td>74.2%</td>
<td>(2018 BRFSS data)</td>
</tr>
<tr>
<td>Average Annual Number of New Cases Age &lt;50</td>
<td>115</td>
<td>National Cancer Institute (2012-2016)</td>
</tr>
<tr>
<td>Average Annual Number of New Cases Age 50+</td>
<td>1,037</td>
<td>National Cancer Institute (2012-2016)</td>
</tr>
</tbody>
</table>

### Does Statute Mention Age?  
**No**

### Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?  
**No**

### What Does Nevada Statute Say About Colorectal Cancer?

**Policies Covered by State Statute**

A health care plan issued by a managed care organization that provides coverage for the treatment of colorectal cancer must provide coverage for colorectal cancer screening in accordance with:

A. The guidelines concerning colorectal cancer screening which are published by the American Cancer Society; or
B. Other guidelines or reports concerning colorectal cancer screening which are published by nationally recognized professional organizations and which include current or prevailing supporting scientific data.

### More Information

<table>
<thead>
<tr>
<th>Statute Tied to ACS, USPSTF or Other?</th>
<th>ACS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives Enrolled in Non-ERISA Plans</td>
<td>1,466,485</td>
</tr>
<tr>
<td>Medicaid Expansion State?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) Grantee?</td>
<td>Yes; <a href="#">Link Here</a></td>
</tr>
</tbody>
</table>

Find out how to take action in your state at [FightCRC.org/Advocacy](http://FightCRC.org/Advocacy)
New Hampshire is the 44th Deadliest state for colorectal cancer in the U.S.

**SUMMARY**

The New Hampshire Colorectal Cancer Screening Program (NHCRCSP) was developed at Dartmouth Hitchcock Medical Center in collaboration with the New Hampshire Department of Health and Human Services (NH DHHS) to increase high quality colorectal cancer screening for New Hampshire residents. It is funded by the CDC to work with healthcare systems, employers, healthcare plans, and media and community organizations to use proven strategies to increase screening and thereby decrease colorectal cancer in New Hampshire.

NHCRCSP is working with healthcare systems, employers, healthcare plans, media and community organizations to implement proven evidence based initiatives to impact colorectal cancer in New Hampshire.

Only Massachusetts and Connecticut have higher CRC screening rates among adults ages 50 to 64.

More details available here.

<table>
<thead>
<tr>
<th><strong>WHAT IS THE STATE OF NEW HAMPSHIRE DOING ABOUT COLORECTAL CANCER SCREENING?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>71.1%</strong> of New Hampshireites ages 50-64 are up to date on screening (2018 BRFSS data)</td>
</tr>
<tr>
<td><strong>80.9%</strong> of New Hampshireites ages 65-75 are up to date on screening (2018 BRFSS data)</td>
</tr>
<tr>
<td><strong>AVERAGE ANNUAL NUMBER OF NEW CASES AGE &lt;50</strong> National Cancer Institute (2012-2016)</td>
</tr>
<tr>
<td><strong>69</strong></td>
</tr>
<tr>
<td><strong>AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+</strong> National Cancer Institute (2012-2016)</td>
</tr>
<tr>
<td><strong>553</strong></td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy

Find out how to take action in your state at FightCRC.org/Advocacy

Find out how to take action in your state at FightCRC.org/Advocacy

Find out how to take action in your state at FightCRC.org/Advocacy
New Jersey is the **22ND DEADLIEST** state for colorectal cancer in the U.S.

**Screening Information**

- **59.6%** of New Jerseyans ages 50-64 are up to date on screening (2018 BRFSS data)
- **82.6%** of New Jerseyans ages 65-75 are up to date on screening (2018 BRFSS data)
- **450** average annual number of new cases age <50
  - National Cancer Institute (2012-2016)
- **3,904** average annual number of new cases age 50+
  - National Cancer Institute (2012-2016)

**Does Statute Mention Age?**

**Yes; 50**

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?**

**No**

**What Does New Jersey Statute Say About Colorectal Cancer?**

**Policies Covered by State Statute**

Every individual policy that provides hospital or medical expense benefits shall provide benefits to any named insured or other person covered thereunder for expenses incurred in conducting colorectal cancer screening at regular intervals.

**Consumers Covered by State Statute**

For persons age 50 and over or any age with high risk

**Colorectal Cancer Screening Methods Covered by State Statute**

The methods of screening for which benefits shall be provided shall include: a screening fecal occult blood test, flexible sigmoidoscopy, colonoscopy, barium enema, or any combination thereof; or the most reliable, medically recognized screening test available.

The method and frequency of screening to be utilized shall be in accordance with the most recent published guidelines of the American Cancer Society and as determined medically necessary by the covered person’s physician, in consultation with the covered person.

**More Information**

| Statute tied to ACS, USPSTF or other? | ACS |
| Lives enrolled in non-ERISA plans | 3,776,364 |
| Medicaid Expansion state? | Yes |
| Colorectal Cancer Control Program (CRCCP) grantee? | No |

Find out how to take action in your state at FightCRC.org/Advocacy

Last Updated: June 2020 | *Full Statute Available Here*
New Mexico is the 31ST DEADLIEST state for colorectal cancer in the U.S.

- **Screening Information**
  - **56.9%** of New Mexicans ages 50-64 are up to date on screening
    (2018 BRFSS data)
  - **76%** of New Mexicans ages 65-75 are up to date on screening
    (2018 BRFSS data)
  - Average annual number of new cases age <50
    National Cancer Institute (2012-2016)
  - Average annual number of new cases age 50+
    National Cancer Institute (2012-2016)

- **Does Statute Mention Age?** NO
- **Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?** NO

**What Does New Mexico Statute Say About Colorectal Cancer?**

**Policies Covered by State Statute**
A blanket or group health policy, health care plan or certificate of health insurance that is delivered, issued for delivery or renewed in this state shall provide coverage for colorectal screening for determining the presence of precancerous or cancerous conditions and other health problems.

**Colorectal Cancer Screening Methods Covered by State Statute**
The coverage shall make available colorectal cancer screening, as determined by the health care provider in accordance with the evidence-based recommendations established by the United States Preventive Services Task Force.

**More Information**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>USPSTF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>1,135,572</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy
New York is the 35TH DEADLIEST state for colorectal cancer in the U.S.

**Summary**

While New York does not have a state mandate for CRC screening, it is one of six states in which the CDC’s Colorectal Cancer Control Program (CRCCP) provides direct screening services. Free colorectal cancer screening tests are available for eligible, uninsured and underinsured New York residents through the New York State Cancer Services Program. Those seeking treatment may be eligible for coverage through the New York State Medicaid Cancer Treatment Program (NYS MCTP).

New York’s screening rate among ages 50 to 64 increased by 1.9% from 2016 to 2018, while ages 65 to 75 decreased by 0.5% over the same period.

More details available here.

### WHAT IS THE STATE OF NEW YORK DOING ABOUT COLORECTAL CANCER SCREENING?

#### Screening Information

- **64.9%** of New Yorkers ages 50-64 are up to date on screening (2018 BRFSS data)
- **78.2%** of New Yorkers ages 65-75 are up to date on screening (2018 BRFSS data)
- **983** average annual number of new cases age <50
  - National Cancer Institute (2012-2016)
- **7,998** average annual number of new cases age 50+
  - National Cancer Institute (2012-2016)

### More Information

<table>
<thead>
<tr>
<th>Frage</th>
<th>Antwort</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorectal cancer screening statute?</td>
<td>No</td>
</tr>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>12,574,540</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>
North Carolina is the 29th deadliest state for colorectal cancer in the U.S.

- 64.9% of North Carolinians ages 50-64 are up to date on screening (2018 BRFSS data)
- 81.7% of North Carolinians ages 65-75 are up to date on screening (2018 BRFSS data)
- 527 average annual number of new cases age <50
  National Cancer Institute (2012-2016)
- 3,706 average annual number of new cases age 50+
  National Cancer Institute (2012-2016)

**What does North Carolina statute say about colorectal cancer?**

**Policies covered by state statute**
- Accident and health insurance policy or certificate; a nonprofit hospital or medical service corporation contract; a health maintenance organization subscriber contract; a plan provided by a multiple employer welfare arrangement; or a plan provided by another benefit arrangement, to the extent permitted by ERISA

**Consumers covered by state statute**
- For any nonsymptomatic covered individual who is:
  - At least 50 years of age, or
  - Less than 50 years of age and at high risk for colorectal cancer according to the most recently published colorectal cancer screening guidelines of the American Cancer Society or guidelines adopted by the North Carolina Advisory Committee on Cancer Coordination and Control.

**Does statute mention age?**
- Yes; 50

**Does statute waive cost-sharing for follow-up colonoscopy?**
- No

**More information**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>ACS or guidelines adopted by the North Carolina Advisory Committee on Cancer Coordination and Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>4,385,283</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>No</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>
North Dakota is the 27th deadliest state for colorectal cancer in the U.S.

**Screening Information**

- **61.7%**
  - Of North Dakotans ages 50-64 are up to date on screening
  - (2018 BRFSS data)

- **76.3%**
  - Of North Dakotans ages 65-75 are up to date on screening
  - (2018 BRFSS data)

- **35**
  - Average annual number of new cases age <50
  - National Cancer Institute (2012-2016)

- **333**
  - Average annual number of new cases age 50+
  - National Cancer Institute (2012-2016)

**What is the State of North Dakota doing about colorectal cancer screening?**

**Summary**

The North Dakota Colorectal Cancer Roundtable (NDCCRT) is dedicated to increasing the use of proven CRC screening tests among the entire population for whom screening is appropriate. Its website provides resources to educate health systems staff and providers, raise awareness with the public, and share the latest data. NDCCRT supports the national “80% in Every Community” initiative and has had more than 20 health organizations across the state sign the pledge.

From 2016 to 2018, North Dakota saw increases in screening rates of 2.3% among ages 50 to 64 and 2.5% among ages 65 to 75.

Find out how to take action in your state at FightCRC.org/Advocacy

**More Information**

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorectal cancer screening statute?</td>
<td>No</td>
</tr>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>373,479</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>
Ohio is the 11th deadliest state for colorectal cancer in the U.S.

61.4% of Ohioans ages 50-64 are up to date on screening (2018 BRFSS data)

76.3% of Ohioans ages 65-75 are up to date on screening (2018 BRFSS data)

582 average annual number of new cases age <50
National Cancer Institute (2012-2016)

5,238 average annual number of new cases age 50+
National Cancer Institute (2012-2016)

WHAT IS THE STATE OF OHIO DOING ABOUT COLORECTAL CANCER SCREENING?

SUMMARY
Ohio’s statewide CRC efforts are supported by the Ohio Partners for Cancer Control (OPCC). The Colorectal Cancer Initiative is among the organization’s primary objectives. To help increase screening rates, OPCC has launched several initiatives including recognition and provider intervention.

The Blue Star Program recognizes hospital systems making extraordinary measures to advance initiatives that support the goal to screen 80% of adults 50 and over. OPCC is also piloting a state-wide FluFIT project by offering home tests to patients at the time of their annual flu shots.

Ohio is one of only nine states that saw decreases in screening rates among ages 50 to 64 (-1%) and 65 to 75 (-0.2%) from 2016 to 2018.

More details available here.

MORE INFORMATION

| Colorectal cancer screening statute? | No |
| Lives enrolled in non-ERISA plans | 5,121,266 |
| Medicaid Expansion state? | Yes |
| Colorectal Cancer Control Program (CRCCP) grantee? | No |

Find out how to take action in your state at FightCRC.org/Advocacy
OKLAHOMA
COLORECTAL CANCER SCREENING LANDSCAPE

Oklahoma is the 3rd DEADLIEST state for colorectal cancer in the U.S.

OF OKLAHOMANS AGES 50-64 ARE UP TO DATE ON SCREENING
(2018 BRFSS data)

54.9%

OF OKLAHOMANS AGES 65-75 ARE UP TO DATE ON SCREENING
(2018 BRFSS data)

75.2%

AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50
National Cancer Institute (2012-2016)

210

AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+
National Cancer Institute (2012-2016)

1,633

WHAT DOES OKLAHOMA STATUTE SAY ABOUT COLORECTAL CANCER?

Policies Covered by State Statute

Any health benefit plan, including the State and Education Employees Group Health Insurance Plan, that is offered, issued or renewed in this state on or after January 1, 2002, which provides medical and surgical benefits, shall offer coverage for colorectal cancer examinations and laboratory tests for cancer for any nonsymptomatic covered individual, in accordance with standard, accepted published medical practice guidelines for colorectal cancer screening.

Consumers Covered by State Statute

1. At least 50 years of age; or
2. Less than 50 years of age and at high risk for colorectal cancer according to the standard, accepted published medical practice guidelines.

Does Statute Mention Age? Yes; 50

Does Statute Waive Cost-Sharing for Follow-up Colonoscopy? No

Statute tied to ACS, USPSTF or other? None

Lives enrolled in non-ERISA plans 1,637,158

Medicaid Expansion state? No

Colorectal Cancer Control Program (CRCCP) grantee? No

Find out how to take action in your state at FightCRC.org/Advocacy
**OREGON COLORECTAL CANCER SCREENING LANDSCAPE**

Oregon is the 32ND DEADLIEST state for colorectal cancer in the U.S.

### POLICIES COVERED BY STATE STATUTE

A health benefit plan, as defined in ORS 743B.005, shall provide coverage for all colorectal cancer screening examinations and laboratory tests assigned either a grade of A or a grade of B by the United States Preventive Services Task Force.

### CONSUMERS COVERED BY STATE STATUTE

If an insured is 50 years of age or older, an insurer may not impose cost sharing on the coverage required by subsection (1) of this section.

### COLORECTAL CANCER SCREENING METHODS COVERED BY STATE STATUTE

The coverage shall include, at a minimum:

1. Fecal occult blood tests;
2. Colonoscopies, including the removal of polyps during a screening procedure; or
3. Double contrast barium enemas; and
4. A colonoscopy, including the removal of polyps during the procedure, if the insured has a positive result on any fecal test assigned either a grade of A or a grade of B by the United States Preventive Services Task Force.

If an insured is at high risk for colorectal cancer, the coverage required by subsection (1) of this section shall include colorectal cancer screening examinations and laboratory tests as recommended by the treating physician.

### WHAT DOES OREGON STATUTE SAY ABOUT COLORECTAL CANCER?

**DOES STATUTE MENTION AGE?**

**YES; 50**

**DOES STATUTE WAIVE COST-SHARING FOR FOLLOW-UP COLONOSCOPY?**

**YES**

### SCREENING INFORMATION

- **OF OREGONIANS AGES 50-64 ARE UP TO DATE ON SCREENING**
  - 2018 BRFSS data
  - 66.6%

- **OF OREGONIANS AGES 65-75 ARE UP TO DATE ON SCREENING**
  - 2018 BRFSS data
  - 80.1%

- **AVG. ANNUAL NUMBER OF NEW CASES AGE <50**
  - National Cancer Institute (2012-2016)
  - 169

- **AVG. ANNUAL NUMBER OF NEW CASES AGE 50+**
  - National Cancer Institute (2012-2016)
  - 1,473

### MORE INFORMATION

- Statute tied to ACS, USPSTF or other? **USPSTF**
- Lives enrolled in non-ERISA plans **2,522,830**
- Medicaid Expansion state? **Yes**
- Colorectal Cancer Control Program (CRCCP) grantee? **Yes; Link Here**

Find out how to take action in your state at FightCRC.org/Advocacy
Pennsylvania is the 14th deadliest state for colorectal cancer in the U.S.

**Screening Information**

- **66.9%**
  - Of Pennsylvanians ages 50-64 are up to date on screening (2018 BRFSS data)

- **78.6%**
  - Of Pennsylvanians ages 65-75 are up to date on screening (2018 BRFSS data)

- **169**
  - Average annual number of new cases age <50
  - National Cancer Institute (2012-2016)

- **1,473**
  - Average annual number of new cases age 50+
  - National Cancer Institute (2012-2016)

**Does Statute Mention Age?**

- Yes; 50

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?**

- No

**What Does Pennsylvania Statute Say About Colorectal Cancer?**

**Policies Covered by State Statute**

Any group health, sickness or accident policy or subscriber contract or certificate offered to groups of 51 or more employees issued by an entity, HMOs, hospital plans, professional health services plans.

**Consumers Covered by State Statute**

Coverage for nonsymptomatic covered individuals who are 50 years of age or older and covered individuals under 50 years who are at high risk.

**Colorectal Cancer Screening Methods Covered by State Statute**

FOBT, sigmoidoscopy, colonoscopy, screening barium enema, and “Screening test consistent with approved medical standards and practices to detect colon cancer.”

**More Information**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>ACS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>6,785,730</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy
Rhode Island is the 36th deadliest state for colorectal cancer in the U.S.

- **OF RHODE ISLANDERS AGES 50-64 ARE UP TO DATE ON SCREENING**
  (2018 BRFSS data)
  - 71%

- **OF RHODE ISLANDERS AGES 65-75 ARE UP TO DATE ON SCREENING**
  (2018 BRFSS data)
  - 84.9%

- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50**
  National Cancer Institute (2012-2016)
  - 44

- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+**
  National Cancer Institute (2012-2016)
  - 406

**DOES STATUTE MENTION AGE?** YES; 45

**DOES STATUTE WAIVE COST-SHARING FOR FOLLOW-UP COLONOSCOPY?** NO

**WHAT DOES RHODE ISLAND STATUTE SAY ABOUT COLORECTAL CANCER?**

**POLICIES COVERED BY STATE STATUTE**

Every individual or group hospital or accident and sickness insurance policy, medical expense insurance policy or individual or group hospital or medical services plan contract delivered, issued for delivery, or renewed in this state shall provide coverage for prostate and colorectal screening examinations and laboratory tests for cancer for any nonsymptomatic person covered under that policy or contract, in accordance with the current American Cancer Society guidelines.

**CONSUMERS COVERED BY STATE STATUTE**

Insureds 45 years of age or older

**COLORECTAL CANCER SCREENING METHODS COVERED BY STATE STATUTE**

Screening tests as recommended by healthcare provider in accordance with the most recently published guidelines of national cancer society.

If an insured is 45 years of age or older, an insurer may not impose cost sharing on the coverage required by subsection (a) of this section and the coverage shall include, at a minimum:

1. Fecal occult blood tests;
2. Colonoscopies, including the removal of polyps during a screening procedure; or
3. Double contrast barium enemas; and
4. A colonoscopy, including the removal of polyps during the procedure, if the insured has a positive result on any fecal test

**MORE INFORMATION**

- Statute tied to ACS, USPSTF or other? ACS
- Lives enrolled in non-ERISA plans 612,300
- Medicaid Expansion state? Yes
- Colorectal Cancer Control Program (CRCCP) grantee? Yes; Link Here

Find out how to take action in your state at FightCRC.org/Advocacy
South Carolina is the 21st DEADLIEST state for colorectal cancer in the U.S.

<table>
<thead>
<tr>
<th>Screening Information</th>
<th>Of South Carolinians Ages 50-64 Are Up to Date on Screening</th>
<th>(2018 BRFSS data)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Of South Carolinians Ages 65-75 Are Up to Date on Screening</td>
<td>(2018 BRFSS data)</td>
</tr>
<tr>
<td></td>
<td>Average Annual Number of New Cases Age &lt;50</td>
<td>National Cancer Institute (2012-2016)</td>
</tr>
<tr>
<td></td>
<td>Average Annual Number of New Cases Age 50+</td>
<td>National Cancer Institute (2012-2016)</td>
</tr>
</tbody>
</table>

**WHAT IS THE STATE OF SOUTH CAROLINA DOING ABOUT COLORECTAL CANCER SCREENING?**

**SUMMARY**

The South Carolina Department of Health and Environmental Control promotes free CRC screenings to eligible patients through the Center for Colon Cancer Research at the Colon Cancer Network. It also notes that state employees and their spouses covered under the State Health Plan (PEBA) may not have to pay for CRC screenings through PEBA Perks. PEBA Perks has removed a patient’s out-of-pocket cost for diagnostic colonoscopies and routine screenings, including the pre-surgical consultation, the generic prep kit, the procedure itself and associated anesthesia. The Standard and Savings Plans follow the age recommendations set by the United States Preventive Services Task Force for routine colonoscopies.

More details available here.

<table>
<thead>
<tr>
<th>More Information</th>
<th>Colorectal cancer screening statute?</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lives enrolled in non-ERISA plans</td>
<td>2,287,407</td>
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<tr>
<td></td>
<td>Medicaid Expansion state?</td>
<td>No</td>
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<tr>
<td></td>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>Yes; Link Here</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy
South Dakota is the 8TH DEADLIEST state for colorectal cancer in the U.S.

**SCREENING INFORMATION**

- **OF SOUTH DAKOTANS AGES 50-64** are up to date on screening (2018 BRFSS data)
  - 63.8%

- **OF SOUTH DAKOTANS AGES 65-75** are up to date on screening (2018 BRFSS data)
  - 76%

- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50**
  - 35
  - National Cancer Institute (2012-2016)

- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+**
  - 384
  - National Cancer Institute (2012-2016)

**WHAT IS THE STATE OF SOUTH DAKOTA DOING ABOUT COLORECTAL CANCER SCREENING?**

**SUMMARY**

The South Dakota Department of Health has launched several initiatives geared toward improving CRC screening rates:

- FluFIT – FluFIT programs help clinics increase access to colorectal cancer screening by offering home tests to patients at the time of their annual flu shots. FluFIT is recommended by many national organizations including the National Colorectal Cancer Roundtable, National Cancer Institute, and American Cancer Society.

- Colorectal Cancer Capacity study completed by South Dakota State University (SDSU) – The purpose of the study was to evaluate the state of South Dakota’s current CRC screening practices and capacity indicators.

- SDSU completes Healthcare Provider Knowledge, Attitudes, Practices, and Beliefs about Colorectal Cancer Screening – The purpose of this project was to explore healthcare provider knowledge, attitudes, practices, and beliefs related to CRC screening.

More details available here.

**MORE INFORMATION**

<table>
<thead>
<tr>
<th></th>
<th>Colorectal cancer screening statute?</th>
<th>Lives enrolled in non-ERISA plans</th>
<th>Medicaid Expansion state?</th>
<th>Colorectal Cancer Control Program (CRCCP) grantee?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>332,527</td>
<td>No</td>
<td>Yes; <a href="#">Link Here</a></td>
</tr>
</tbody>
</table>

Find out how to take action in your state at [FightCRC.org/Advocacy](http://FightCRC.org/Advocacy).

Last Updated: June 2020 | Program Details Here
TENNESSEE
COLORECTAL CANCER SCREENING LANDSCAPE

Tennessee is the 10TH DEADLIEST state for colorectal cancer in the U.S.

- **OF TENNESSEANS AGES 50-64 ARE UP TO DATE ON SCREENING**
  - 61.5%
  - (2018 BRFSS data)

- **OF TENNESSEANS AGES 65-75 ARE UP TO DATE ON SCREENING**
  - 81.2%
  - (2018 BRFSS data)

- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50**
  - 359
  - National Cancer Institute (2012-2016)

- **AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+**
  - 2,727
  - National Cancer Institute (2012-2016)

**WHAT DOES TENNESSEE STATUTE SAY ABOUT COLORECTAL CANCER?**

<table>
<thead>
<tr>
<th>DOES STATUTE MENTION AGE?</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOES STATUTE WAIVE COST-SHARING FOR FOLLOW-UP COLONOSCOPY?</td>
<td>NO</td>
</tr>
</tbody>
</table>

**POLICIES COVERED BY STATE STATUTE**

All individual and group health insurance policies providing coverage on an expense incurred basis, individual and group service contracts issued by a health maintenance organization, all self-insured group arrangements to the extent not preempted by federal law and all managed health care delivery entities of any type or description, that are delivered or issued on or after January 1, 2004, in this state shall include, or shall offer to prospective policyholders and existing policyholders on renewal, as an optional benefit, coverage for colorectal cancer examinations and laboratory tests specified in current American Cancer Society guidelines or federal Preventive Services Task Force guidelines for colorectal cancer screening of asymptomatic individuals.

**MORE INFORMATION**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>ACS or USPSTF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>2,979,311</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>No</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy

Last Updated: June 2020 | *Full Statute Available Here*
Texas is the 24th Deadliest state for colorectal cancer in the U.S.

**Policies Covered by State Statute**

The Texas Insurance Code now mandates coverage for colorectal cancer screening services by health plans. This policy applies to most health plans issued or renewed on or after Jan. 1, 2002. The health plans also must give written notice regarding coverage to each person enrolled in the plan.

**Consumers Covered by State Statute**

Enrollees who are 50 or older and at normal risk for developing colon cancer.

**Colorectal Cancer Screening Methods Covered by State Statute**

The minimum coverage required includes:

1. (1) A fecal-occult blood test performed annually and a flexible sigmoidoscopy performed every five years; or
2. (2) A colonoscopy performed every 10 years.

A 2009 bulletin from the Texas Department of Insurance (# B-0006-09) indicates that stool DNA tests are now acceptable forms of CRC screening and “Texas Insurance Code §1363.003 requires a medically recognized screening examination for the detection of colorectal cancer in certain situations.”

**What Does Texas Statute Say About Colorectal Cancer?**

<table>
<thead>
<tr>
<th>Does Statute Mention Age?</th>
<th>Yes; 50</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?</td>
<td>No</td>
</tr>
</tbody>
</table>

**Screening Information**

- **54%** OF TEXANS AGES 50-64 ARE UP TO DATE ON SCREENING (2018 BRFSS data)
- **71.6%** OF TEXANS AGES 65-75 ARE UP TO DATE ON SCREENING (2018 BRFSS data)
- **1,269** AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50 National Cancer Institute (2012-2016)
- **8,581** AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+ National Cancer Institute (2012-2016)

**More Information**

<table>
<thead>
<tr>
<th>Lives enrolled in non-ERISA plans</th>
<th>10,168,820</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid Expansion state?</td>
<td>No</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>

Find out how to take action in your state at FightCRC.org/Advocacy
**SUMMARY**
Utah's Colorectal Cancer Control Program pays for the following:

1. Screening Tests and Procedures: colonoscopy every ten years, biopsy/polypectomy during colonoscopy, moderate sedation for colonoscopy, the use of propofol only if prior approval is obtained, and office visits related to the tests listed above.

2. Diagnostic Follow-up Services: office visits related to screening and diagnostic tests, total colon exam with colonoscopy, biopsy/polypectomy during colonoscopy, moderate sedation for colonoscopy, the use of propofol only if prior approval is obtained, and pathology fees.

3. Surveillance: surveillance colonoscopies will be reimbursed at appropriate intervals as determined by the recommending clinician, the program, or the program's Medical Advisory Board (MAB).

To be eligible to receive services from the Utah Cancer Control Program, an individual:

A. must be aged 50 to 64 years old;
B. must have income at or below 250% of Federal Poverty Level;
C. must have no insurance, inadequate insurance coverage that does not pay for these services, or cannot afford the insurance co-pay.
D. must be a current Utah resident.

More details available here.

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**WHAT IS THE STATE OF UTAH DOING ABOUT COLORECTAL CANCER SCREENING?**

- **Of Utahns Ages 50-64 are up to date on screening** (2018 BRFSS data) - 64.2%
- **Of Utahns Ages 65-75 are up to date on screening** (2018 BRFSS data) - 80.1%
- **Average annual number of new cases age <50** (National Cancer Institute, 2012-2016) - 124
- **Average annual number of new cases age 50+** (National Cancer Institute, 2012-2016) - 606

Find out how to take action in your state at FightCRC.org/Advocacy

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**MORE INFORMATION**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Colorectal cancer screening statute?</td>
<td>No</td>
</tr>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>1,301,021</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>No</td>
</tr>
</tbody>
</table>
Vermont is the 25th deadliest state for colorectal cancer in the U.S.

66.6% of Vermonters ages 50-64 are up to date on screening (2018 BRFSS data)

77.5% of Vermonters ages 65-75 are up to date on screening (2018 BRFSS data)

27 average annual number of new cases age <50 (National Cancer Institute, 2012-2016)

258 average annual number of new cases age 50+ (National Cancer Institute, 2012-2016)

Does statute mention age? Yes; 50

Does statute waive cost-sharing for follow-up colonoscopy? No

What does Vermont statute say about colorectal cancer?

Policies covered by state statute:
Insurance companies that provide health insurance, nonprofit hospital and medical services corporations, and health maintenance organizations (but not to plans with coverage for specified disease or other limited benefit coverage).

Colorectal cancer screening services performed under contract with the insurer shall not be subject to any co-payment, deductible, coinsurance, or other cost-sharing requirement. In addition, an insured shall not be subject to any additional charge for any service associated with a procedure or test for colorectal cancer screening, which may include one or more of the following: (1) removal of tissue or other matter; (2) laboratory services; (3) physician services; (4) facility use; and (5) anesthesia.

Consumers covered by state statute:
50 years of age or older

Colorectal cancer screening methods covered by state statute:
1. Annual fecal occult blood testing plus one flexible sigmoidoscopy every five years; or
2. One colonoscopy every 10 years.

For an insured who is at high risk for colorectal cancer, colorectal cancer screening examinations and laboratory tests as recommended by the treating physician.
Virginia is the 28TH DEADLIEST state for colorectal cancer in the U.S.

**POLICIES COVERED BY STATE STATUTE**

Each insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical or major medical coverage on an expense-incurred basis; each corporation providing individual or group accident and sickness subscription contracts; and each health maintenance organization providing a health care plan for health care services shall provide coverage for colorectal cancer screening under any such policy, contract or plan delivered, issued for delivery or renewed in this Commonwealth, on and after July 1, 2000.

**CONSUMERS COVERED BY STATE STATUTE**

Shall be provided in accordance with the most recently published recommendations established by the American College of Gastroenterology, in consultation with the American Cancer Society, for the ages, family histories, and frequencies referenced in such recommendations.

**COLORECTAL CANCER SCREENING METHODS COVERED BY STATE STATUTE**

Coverage for colorectal cancer screening, specifically screening with an annual fecal occult blood test, flexible sigmoidoscopy or colonoscopy, or in appropriate circumstances radiologic imaging, shall be provided in accordance with the most recently published recommendations established by the American College of Gastroenterology, in consultation with the American Cancer Society, for the ages, family histories, and frequencies referenced in such recommendations.

**MORE INFORMATION**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>American College of Gastroenterology, in consultation with ACS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>3,247,820</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>Yes; [Link Here]</td>
</tr>
</tbody>
</table>
Washington is the 48th Deadliest state for colorectal cancer in the U.S.

**Screening Information**

65.7% OF WASHINGTONIANS AGES 50-64 ARE UP TO DATE ON SCREENING  
(2018 BRFSS data)

79.3% OF WASHINGTONIANS AGES 65-75 ARE UP TO DATE ON SCREENING  
(2018 BRFSS data)

341 AVERAGE ANNUAL NUMBER OF NEW CASES AGE <50  
(National Cancer Institute 2012-2016)

2,459 AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+  
(National Cancer Institute 2012-2016)

**Does Statute Mention Age?** Yes; 50

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?** No

**What Does Washington Statute Say About Colorectal Cancer?**

**Policies Covered by State Statute**
Health plans issued or renewed on or after July 1, 2008, must provide benefits or coverage for colorectal cancer examinations and laboratory tests consistent with the guidelines or recommendations of the United States Preventive Services Task Force or the federal centers for disease control and prevention.

**Consumers Covered by State Statute**
To a covered individual who is:
1. At least 50 years old; or
2. Less than 50 years old and at high risk or very high risk for colorectal cancer according to such guidelines or recommendations.

**Colorectal Cancer Screening Methods Covered by State Statute**
For any of the colorectal screening examinations and tests in the selected guidelines or recommendations, at a frequency identified in such guidelines or recommendations, as deemed appropriate by the patient's physician after consultation with the patient.

**More Information**

<table>
<thead>
<tr>
<th></th>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>USPSTF or CDC</th>
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<td>Lives enrolled in non-ERISA plans</td>
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<tr>
<td>Medicaid Expansion state?</td>
<td>Yes</td>
<td></td>
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<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
<td>Yes; <a href="#">Link Here</a></td>
<td></td>
</tr>
</tbody>
</table>
West Virginia is the 2ND DEADLIEST state for colorectal cancer in the U.S.

**POLICIES COVERED BY STATE STATUTE**

Notwithstanding any provision of any policy, provision, contract, plan or agreement applicable to this article, reimbursement or indemnification for colorectal cancer examinations and laboratory testing may not be denied.

**CONSUMERS COVERED BY STATE STATUTE**

Any nonsymptomatic person 50 years of age or older, or a symptomatic person under 50 years of age, when reimbursement or indemnity for laboratory or X-ray services are covered under the policy and are performed for colorectal cancer screening or diagnostic purposes at the direction of a person licensed to practice medicine and surgery by the board of medicine.

**COLORECTAL CANCER SCREENING METHODS COVERED BY STATE STATUTE**

The tests are as follows:

1. An annual fecal occult blood test;
2. A flexible sigmoidoscopy repeated every five years;
3. A colonoscopy repeated every ten years;
4. A double contrast barium enema repeated every five years.

**WHAT DOES WEST VIRGINIA STATUTE SAY ABOUT COLORECTAL CANCER?**

- **Does Statute Mention Age?** Yes; 50
- **Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?** No

**MORE INFORMATION**

- Statute tied to ACS, USPSTF or other? None
- Lives enrolled in non-ERISA plans 878,636
- Medicaid Expansion state? Yes
- Colorectal Cancer Control Program (CRCCP) grantee? Yes; [Link Here](#)
Wisconsin is the 33rd Deadliest state for colorectal cancer in the U.S.

**Policies Covered by State Statute**
Except as provided in par. (c), every disability insurance policy, and every self-insured health plan of the state or a county, city, village, town, or school district, that provides coverage of any diagnostic or surgical procedures shall provide coverage of colorectal cancer examinations and laboratory tests, in accordance with guidelines specified by the commissioner by rule under par. (d) 1. and 3.

**Consumers Covered by State Statute**
1. An insured or enrollee who is 50 years of age or older.
2. An insured or enrollee who is under 50 years of age and at high risk for colorectal cancer, as specified by the commissioner by rule under par. (d) 2. and 3.

**Colorectal Cancer Screening Methods Covered by State Statute**
The latest promulgation by the Commissioner states that “Insurers are required to provide coverage for all cancer screening tests or procedures if specific colorectal cancer screening tests or procedures are approved by the selected guideline and provide coverage for all cancer screening tests or procedures covered under Medicare.”

Section Ins 3.35 (3) (b), Wis. Adm. Code, requires that insurers no less than annually review the designated guidelines for modifications and additions and update the benefits offered for the detection of colorectal cancer to be reflective of the guideline standards selected by the insurer. This will ensure that consumers are receiving the most up-to-date cancer screenings that have been determined to be effective in early detection of colon cancer.

**Screening Information**
- **Screening Information**
  - **70% of Wiscosinites Ages 50-64 Are up to Date on Screening**
  - **82.9% of Wiscosinites Ages 65-75 Are up to Date on Screening**
  - **265 Average Annual Number of New Cases Age <50**
  - **2,286 Average Annual Number of New Cases Age 50+**

**Does Statute Mention Age?**
Yes; 50

**Does Statute Waive Cost-Sharing for Follow-Up Colonoscopy?**
No

**What Does Wisconsin Statute Say About Colorectal Cancer?**

**More Information**
- Statute tied to ACS, USPSTF or other? USPSTF, NCI, and ACS
- Lives enrolled in non-ERISA plans 2,861,542
- Medicaid Expansion state? No
- Colorectal Cancer Control Program (CRCCP) grantee? Yes; Link Here

Find out how to take action in your state at FightCRC.org/Advocacy
Wyoming is the 41st deadliest state for colorectal cancer in the U.S.

<table>
<thead>
<tr>
<th>SCREENING INFORMATION</th>
<th>OF WYOMINGITES AGES 50-64 ARE UP TO DATE ON SCREENING</th>
<th>(2018 BRFSS data)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>51.5%</td>
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</tr>
<tr>
<td></td>
<td>68.5%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>OF WYOMINGITES AGES 65-75 ARE UP TO DATE ON SCREENING</td>
<td>(2018 BRFSS data)</td>
</tr>
<tr>
<td></td>
<td>22</td>
<td></td>
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<tr>
<td></td>
<td>192</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AVERAGE ANNUAL NUMBER OF NEW CASES AGE &lt;50</th>
<th>National Cancer Institute (2012-2016)</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td></td>
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<table>
<thead>
<tr>
<th>AVERAGE ANNUAL NUMBER OF NEW CASES AGE 50+</th>
<th>National Cancer Institute (2012-2016)</th>
</tr>
</thead>
<tbody>
<tr>
<td>192</td>
<td></td>
</tr>
</tbody>
</table>

**DOES STATUTE MENTION AGE?** NO

**DOES STATUTE WAIVE COST-SHARING FOR FOLLOW-UP COLONOSCOPY?** NO

**WHAT DOES WYOMING STATUTE SAY ABOUT COLORECTAL CANCER?**

All group and blanket disability insurance policies providing coverage on an expense incurred basis, group service or indemnity type contracts issued by a nonprofit corporation, group service contracts issued by a health maintenance organization, all self-insured group arrangements to the extent not preempted by federal law and all managed health care delivery entities of any type or description, that are delivered, issued for delivery, continued or renewed on or after July 1, 2001, and providing coverage to any resident of this state shall provide benefits or coverage for: A colorectal cancer examination and laboratory tests for cancer for any nonsymptomatic person covered under the policy or contract.

**MORE INFORMATION**

<table>
<thead>
<tr>
<th>Statute tied to ACS, USPSTF or other?</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives enrolled in non-ERISA plans</td>
<td>143,468</td>
</tr>
<tr>
<td>Medicaid Expansion state?</td>
<td>No</td>
</tr>
<tr>
<td>Colorectal Cancer Control Program (CRCCP) grantee?</td>
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Find out how to take action in your state at FightCRC.org/Advocacy