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The Honorable Robert Aderholt  
Chair  
House Appropriations Subcommittee on  
Labor, Health and Human Services,  
Education  
Room H-307, The Capitol  
Washington, D.C. 20515

The Honorable Rosa DeLauro  
Ranking Member  
House Appropriations Subcommittee on  
Labor, Health and Human Services,  
Education  
Room H-307, The Capitol  
Washington, D.C. 20515

Dear Chairman Aderholt and Ranking Member DeLauro:

As you consider the House Labor, Health and Human Services, Education Appropriations bill for Fiscal Year (FY) 2025, we encourage the Committee to include ***\$64 million for the Center for Disease Control and Prevention's (CDC) Colorectal Cancer Control Program (CRCCP)***. The increase in funding will allow the CRCCP to reach more communities in more states to serve populations that face the greatest challenges to getting screened.

Colorectal cancer is the second leading cause of cancer death among men and women combined. According to the American Cancer Society, it is estimated that over 152,810 cases of colorectal cancer will be diagnosed in the United States in 2024, and 53,010 people will die.<sup>[1]</sup> Unfortunately, even prior to the challenges presented by COVID-19, far too many Americans were not getting screened. Colorectal cancer is one of the only preventable cancers and is highly treatable when caught early. It is more imperative than ever that we support programs like the CRCCP that increase education and screening in underserved communities. It is estimated that tens of thousands of colorectal cancer deaths could be avoided if people are screened appropriately.<sup>[2]</sup>

Colorectal cancer disproportionately impacts communities of color. Black individuals have the highest incidence and mortality and face lower survival than white individuals. American Indians and Alaskan Natives also have elevated rates and deaths compared to the general population and represent the only racial and ethnic group for whom colorectal cancer mortality rates are not declining. Racial and ethnic minorities are also less likely to be screened for colorectal cancer and, as a result, are more likely than white individuals to present with late-stage, incurable disease.<sup>[3]</sup>

The mission of the CRCCP is to increase colorectal cancer screening rates among people between ages 45 and 75 by implementing evidence-based interventions through partnerships with local health systems and providing screening and follow-up services for the country's most vulnerable patients.

The CRCCP currently supports 35 award recipients, including 20 states, eight universities, two tribal organizations, and five other types of organizations. Grants are awarded through a competitive process designed to focus on increasing screening in targeted populations by working with local community organizations. This allows each community to implement an evidence-based program that works best for its unique population. Recipients are partnering with over 500 clinics across the U.S., operating in 32 states and the District of Columbia, to serve over 600,000 patients ages 45-75. In the previous five-year funding

cycle (2015-2019), the program partnered with over 800 clinics that served 1.3 million patients, and among clinics participating for all five years, screening rates increased by an average of 13 percentage points in the first four years, saving money and saving lives.

As the Committee continues its work on the FY2025 appropriations bills, we ask that you provide \$64 million for this important program so that the CRCCP can continue its work and expand life-saving screening to all of our nation's most vulnerable patients.

We appreciate your consideration and look forward to working with you on this important matter.

[[CLOSING]]

[[SIGNATURES]]

<sup>[1]</sup> American Cancer Society. Cancer Facts & Figures 2024. Atlanta: American Cancer Society; 2024. Retrieved from <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2024/2024-cancer-facts-and-figures-acf.pdf>

<sup>[2]</sup> Meester, R. G., Doubeni, C. A., Lansdorp-Vogelaar, I., Goede, S. L., Levin, T. R., Quinn, V. P., Ballegooijen, M.v, Corley, D. A., & Zauber, A. G. (2015). Colorectal cancer deaths attributable to nonuse of screening in the United States. *Annals of epidemiology*, 25(3), 208–213.e1. <https://doi.org/10.1016/j.annepidem.2014.11.011>

<sup>[3]</sup> American Cancer Society. Colorectal Cancer Facts & Figures 2020-2022. Atlanta: American Cancer Society; 2020. Retrieved from <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures-2020-2022.pdf>