

Colorectal Cancer Screening in 2020

OVERVIEW

2020 was a year like no other, with the COVID-19 pandemic having dramatic impacts on most aspects of life including how patients sought care and how health care providers delivered it.

This issue brief presents statewide data for 2020 for the Colorectal Cancer Screening measure, with comparison to 2019 as context for understanding the disruptions experienced in 2020. In many respects, however, 2020 should be considered a new baseline from which recovery should be measured. Although MNCM is also publishing 2020 quality measures for individual medical groups*, we urge caution in using this data or changes in rates for specific medical groups between 2019 and 2020 to draw general conclusions about quality of care. Organizations faced different types of challenges, that are likely reflected in the data in ways that are not typical of overall quality of care. However, MNCM stakeholders strongly supported continuing to make the data publicly transparent.

KEY FINDINGS

- Statewide, the Colorectal Cancer Screening measure decreased from 73.2% in 2019 to 70.6% in 2020.
- In general, all demographic categories showed a decrease in screening rates between 2019 and 2020.
- In general, all demographic categories showed a decline in patient volume between 2019 and 2020.
- The groups who experienced a significant worsening in their existing disparities for colorectal cancer screening were patients with the following demographic characteristics: Asian, Black, Hispanic/Latinx, on MHCP insurance, uninsured, in the lowest socioeconomic status (SES) quartile or in the low-medium SES quartile. Additionally, disparities worsened in some regions more than others.

COLORECTAL CANCER SCREENING

The percentage of patients between 50-75 years of age who had at least one eligible office visit between 1/1/2020 and 12/21/2020 and who had an up-to-date colorectal cancer screening as defined by any of the following:



Colonoscopy performed during the measurement period or prior nine years



Sigmoidoscopy performed during the measurement period or prior four years



CT colonography performed during the measurement period or prior four years



FIT-DNA test performed during the measurement period or prior two years



Stool blood test performed during the measurement period

*Quality measures for individual clinic locations will not be public for 2020

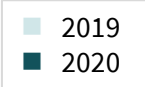
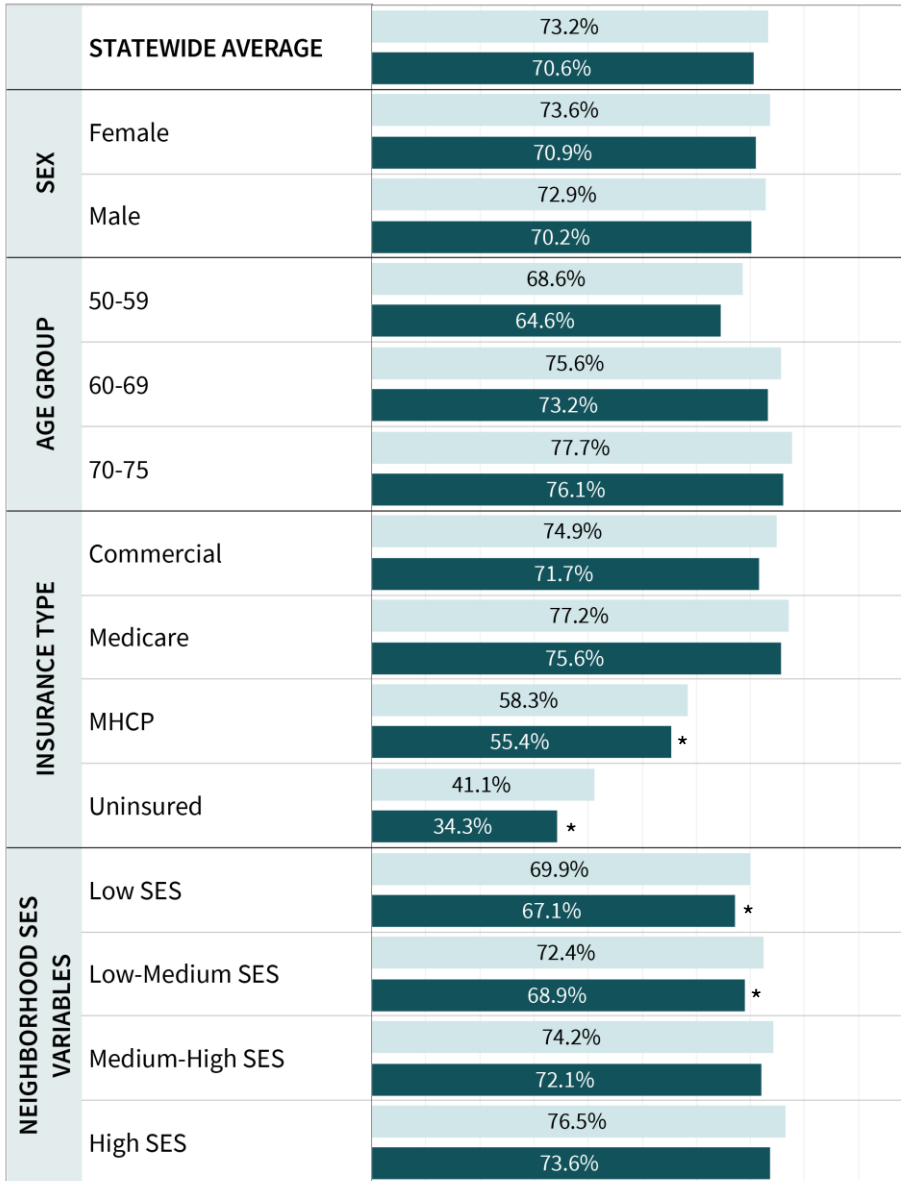


Colorectal Cancer Screening in 2020

RATE CHANGES

Sex, Age Group, Insurance Type, Neighborhood Socioeconomic (SES) Variables

Comparison of 2020 to 2019



Screening rates decreased across all demographic groups. The largest significant decreases in rates occurred in the following groups within each demographic category:

- Both females & males (-2.7 percentage points)
- 50-59 age group (-4.0 percentage points)
- Uninsured (-6.8 percentage points)
- Low-medium SES (-3.6 percentage points)

Additionally, in 2020, patients with MHCP insurance, were uninsured, in the lowest SES category or the low-medium SES category had a significant worsening of their existing disparities for colorectal cancer screening.

Socioeconomic status (SES) variables represent quartiles of distribution of SES data from the Census Bureau, which is based on zip codes in which patients reside.

* Disparity between the rate for this category and the statewide average increased in 2020
 MHCP = Minnesota Health Care Program
 2019 = care delivered in 2019 and reported in 2020
 2020 = care delivered in 2020 and reported in 2021

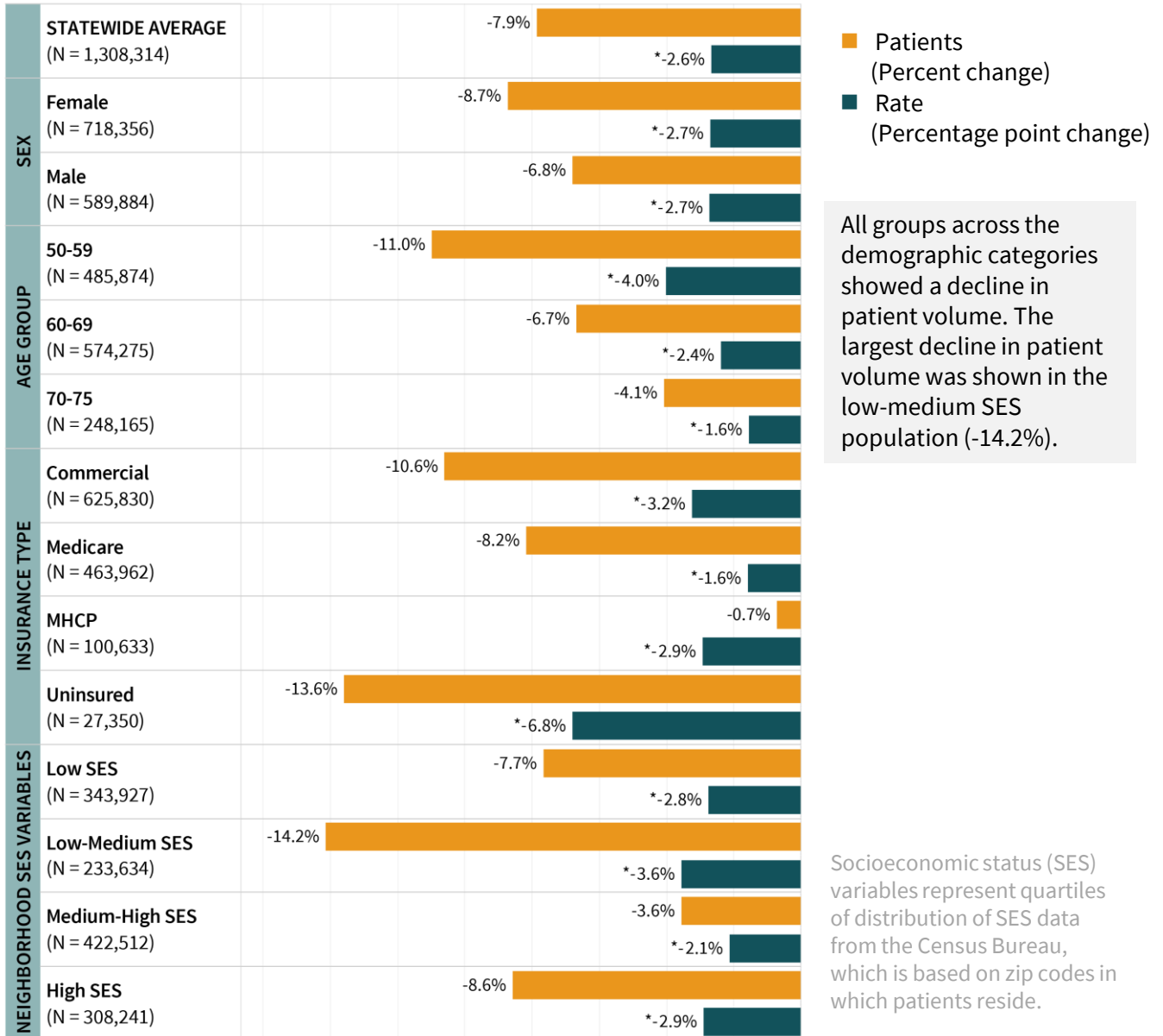


Colorectal Cancer Screening in 2020

POPULATION & RATE CHANGES

Sex, Age, Insurance Type, Neighborhood Socioeconomic (SES) Variables

Comparison of 2020 to 2019



*Significant rate change from 2019

Note: Ns in chart are 2020 denominators

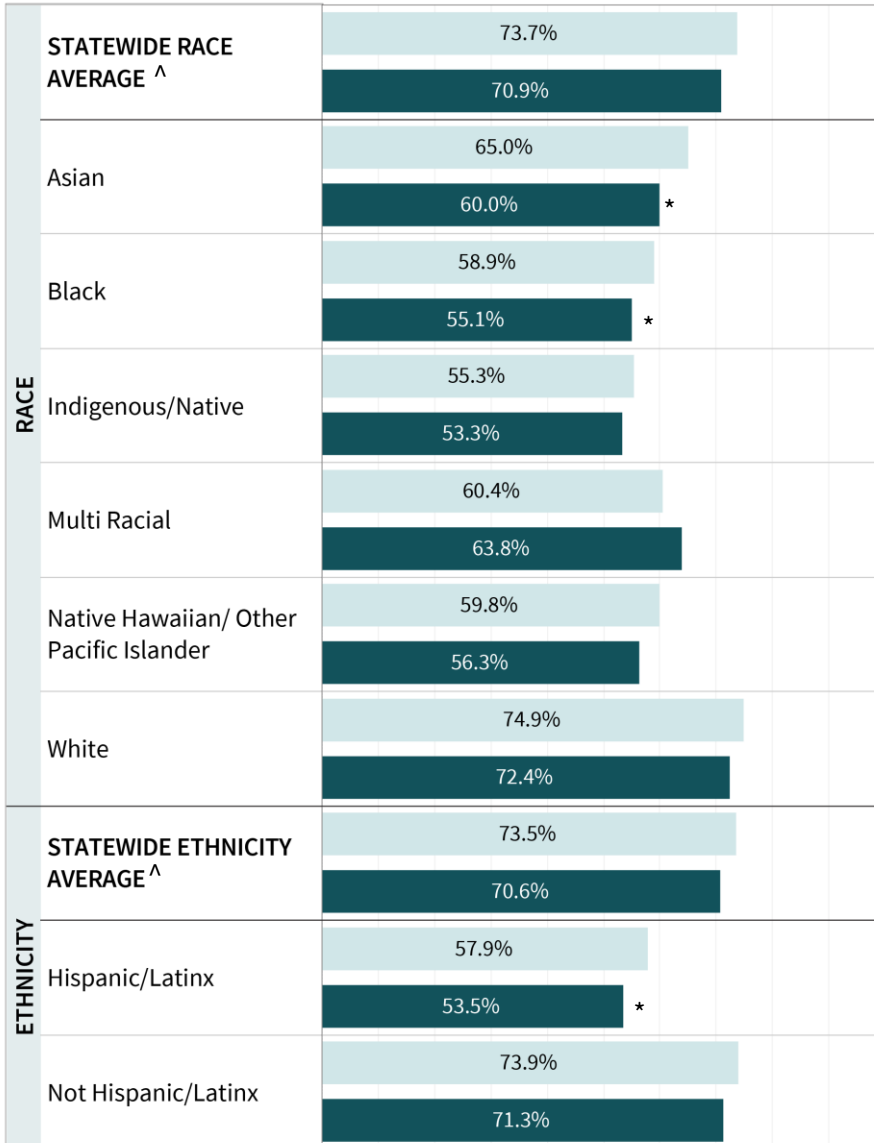


Colorectal Cancer Screening in 2020

RATE CHANGES

Race/Ethnicity

Comparison of 2020 to 2019



Patients from almost all races and ethnicities had lower rates of colorectal cancer screening in 2020. The following groups showed significant decreases:

- Asian (-5.0 percentage points)
- Black (-3.9 percentage points)
- White (-2.5 percentage points)
- Hispanic/Latinx (-4.4 percentage points)
- Not Hispanic/Latinx (-2.6 percentage points)

Additionally, in 2020, Asian, Black and Hispanic/Latinx patients had a significant worsening of their existing disparities for colorectal cancer screening.

* Disparity between the rate for this category and the statewide average increased in 2020

[^]Statewide race/ethnicity averages are averages for patients with race/ethnicity information available

2019 = care delivered in 2019 and reported in 2020

2020 = care delivered in 2020 and reported in 2021

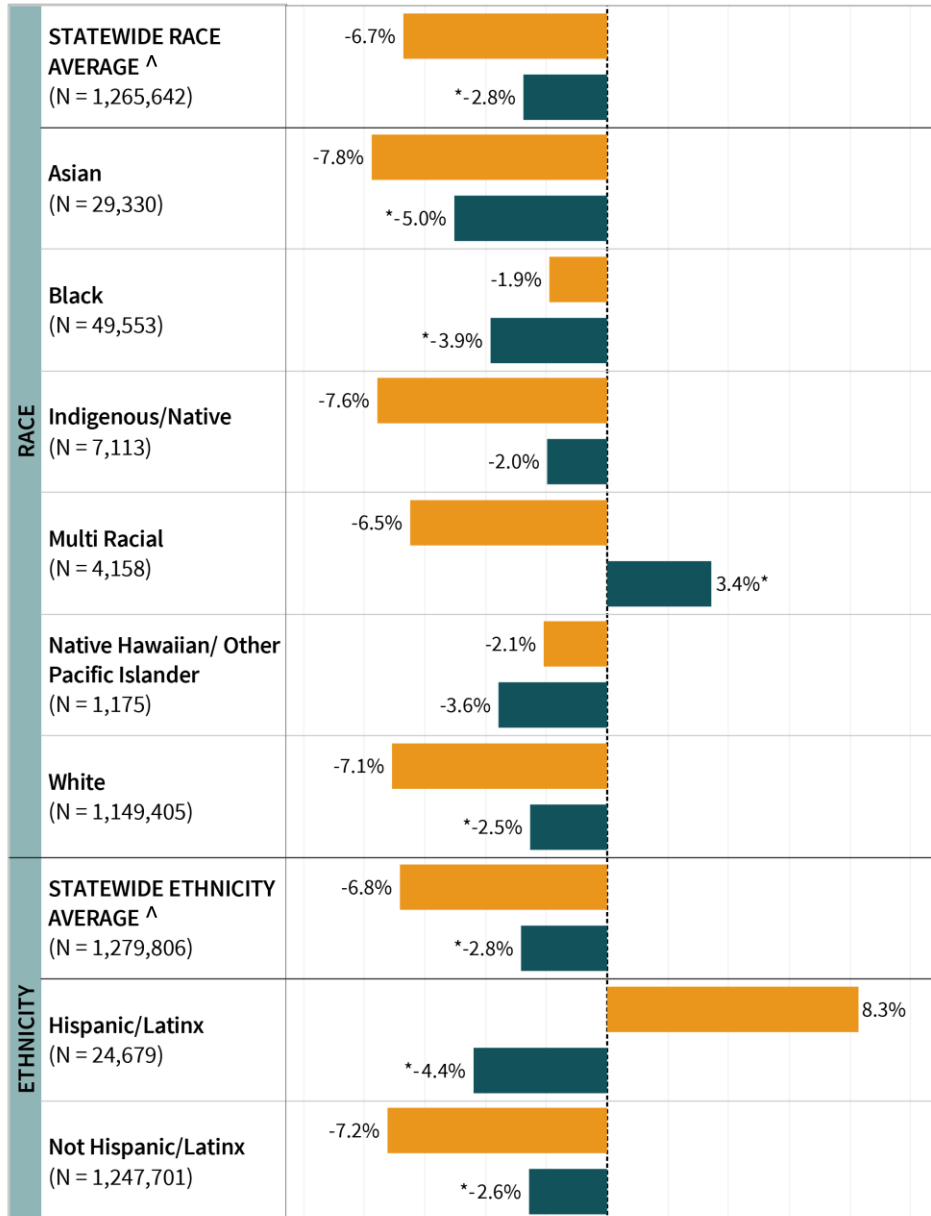


Colorectal Cancer Screening in 2020

POPULATION & RATE CHANGES

Race/ethnicity

Comparison of 2020 to 2019



■ Patients (Percent change)
■ Rate (Percentage point change)

The number of patients declined across most race/ethnicity categories. The largest decline in population was found in the Asian population (-7.8%).

The Hispanic/Latinx population showed a large increase in number of patients; however, the number of patients reporting Hispanic/Latinx ethnicity has been increasing for several years and is not unique to 2020 dates of service.

*Significant rate change from 2019

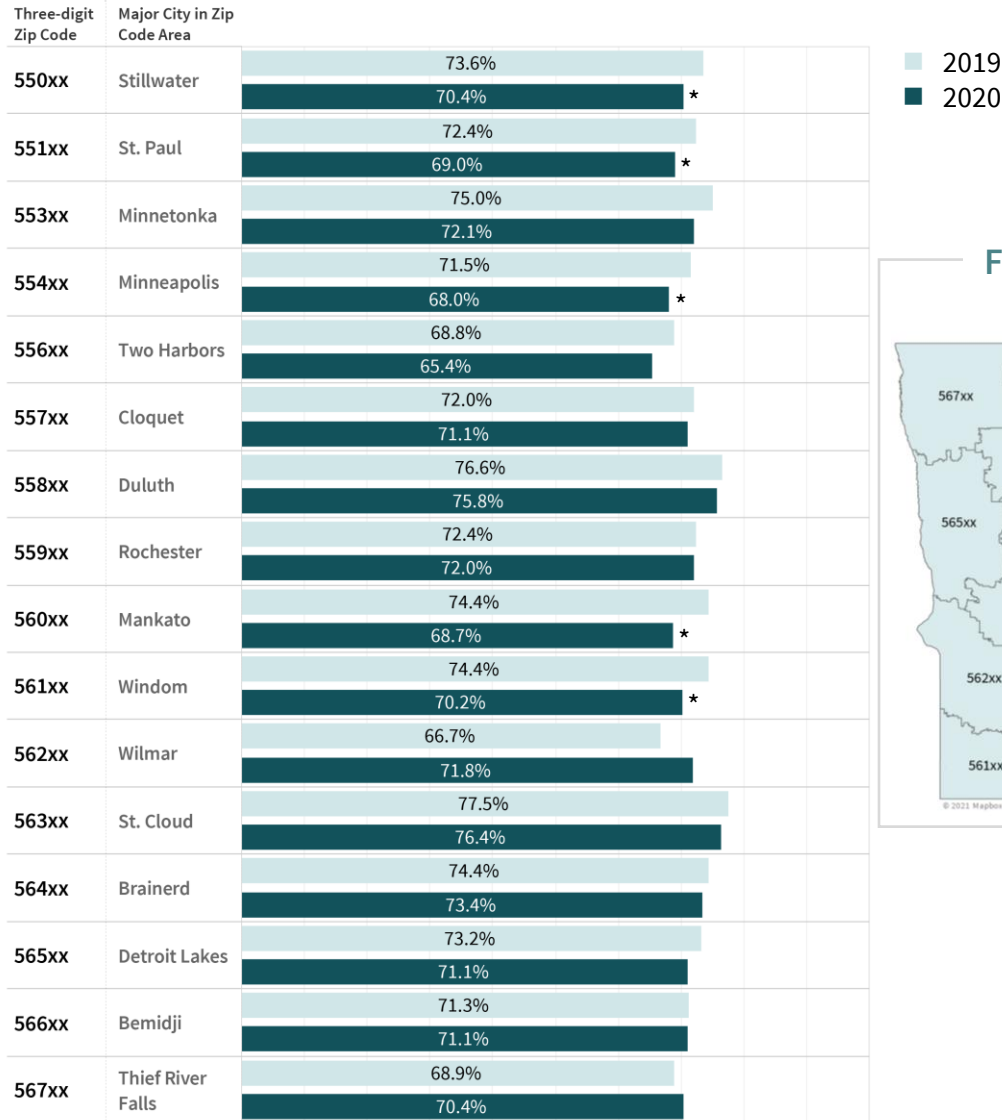
[^]Statewide race/ethnicity averages are averages for patients with race/ethnicity information available

Note: Ns in chart are 2020 denominators



Colorectal Cancer Screening in 2020

THREE-DIGIT ZIP CODE



2019
2020

FOR REFERENCE



* Disparity between the rate for this category and the statewide average increased in 2020
 2019 = care delivered in 2019 and reported in 2020
 2020 = care delivered in 2020 and reported in 2021

From 2019 to 2020, the rates of colorectal cancer screening in some three-digit zip code areas decreased while rates increased other areas. In 2020, the 550 (Stillwater area), 551 (St. Paul area), 554 (Minneapolis), 560 (Mankato area) and 561 (Windom area) regions showed a significant worsening of their existing disparities for colorectal cancer screening.



Colorectal Cancer Screening in 2020

ISSUE BRIEF SERIES

This issue brief is one of a series of issue briefs that summarizes the impact of COVID-19 at the demographic level for each of the measures. The measures featured in the summary report and in the issue briefs are measures collected by MNCM directly from medical groups and clinics. Below are links to each of the other measure issue briefs as well as the spotlight report which summarizes the overall rate changes and findings.

- [Spotlight Report](#)
- [Optimal Diabetes Care](#)
- [Optimal Vascular Care](#)
- [Optimal Asthma Control](#)
- [Adolescent Mental Health and/or Depression Screening](#)
- [Depression Care](#)

REPORTS CREATED BY

Jessica Donovan, MPH, BSN
Clinical Measurement Analyst

Gunnar Nelson
Health Economist

Julie Sonier, MPA
President & CEO of MNCM

