

## *Colorectal Cancer Detection Act of 2018*

The *Colorectal Cancer Detection Act of 2018*—introduced by U.S. Senators Shelley Moore Capito (R-WV) and Martin Heinrich (D-NM)—seeks to increase access to, and participation in, colorectal cancer screening. This legislation would place all Food and Drug Administration (FDA)-approved blood-based screening tests on equal footing with available screening methods and authorize CMS reimbursement. Currently, lack of authorization for reimbursement from Medicare is preventing seniors from accessing all screening options for colorectal cancer.

### **Background**

Colorectal cancer is the third leading cause of cancer-related deaths in men and women in the United States. According to the American Cancer Society, it's expected to cause roughly 50,630 deaths during 2018. However, the death rate of colorectal cancer has been dropping for several decades.

One reason for this decline is screening. Regular colorectal cancer screening is one of the most powerful weapons for preventing colorectal cancer. Nearly two-thirds of the screening-eligible population currently participates in regular screening for colorectal cancer. Screening is recommended starting at age 50 for people who are not at increased risk of colorectal cancer, and there are several different screening options available. When colorectal cancer is found at an early stage before it has spread, the 5-year relative survival rate is about 90 percent. But only about 4 out of ten colorectal cancers are found at this early stage.

To continue bringing down the death rate for colorectal cancer and avoiding preventable deaths, the barriers that are preventing 1 in 3 people in the United States who should get tested for colorectal cancer from being screened must be addressed. These barriers include a lack of knowledge that regular testing could save their lives from this disease and cost and health insurance coverage issues. These barriers can be exacerbated in rural areas where physical access to facilities that offer screening can also be a deterrent.

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In order to break through barriers to screenings access, new innovative answers are needed. One such potential answer emerged in 2016 when a non-invasive assay that detects the presence of a DNA marker that may be present in the blood of patients with colorectal cancer was approved by the FDA. However, while approved for use in the U.S. marketplace, Medicare reimbursement for this test has not been authorized.

The *Colorectal Cancer Detection Act of 2018* seeks to address this issue and remove this potential barrier to screening. By increasing access to, and participation in, screening programs, thousands of colorectal cancers which may otherwise go undetected could be found and lives saved.