

Inclusion of CTC as HEDIS screening modality could increase colorectal cancer screening compliance

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Availability of CT colonography (CTC), commonly known as virtual colonoscopy, is increasing colorectal cancer (CRC) screening rates across military medical facilities. Inclusion of CTC as a Healthcare Effectiveness Data and Information Set (HEDIS)-compliant colorectal cancer (CRC) screening test can potentially raise overall screening rates, according to a study in the January issue of the *Journal of the American College of Radiology*.

The National Committee for Quality Assurance developed HEDIS to provide quality measures for the evaluation of standards of medical care across health plans. Although CTC is included in the most recent screening guidelines jointly released by the American Cancer Society, the ACR, and the U.S. Multi-Society Task Force on Colorectal Cancer in 2008, it has not been included as a qualifying test for the numerator of the HEDIS CRC screening metric. Current HEDIS measures for CRC screening include fecal occult blood testing, flexible sigmoidoscopy and colonoscopy.

"The aim of our analysis was to quantify the use of CTC for CRC screening and demonstrate the potential impact of including CTC as a HEDIS-acceptable screening modality," said Brooks D. Cash, MD, author of the study.

Demographic and health care utilization data from the Military Health



System Population Health Portal for January 1, 2005, through December 31, 2010, for individuals aged 50 to 75, were analyzed to determine the degree of overall utilization of CTC. Screening compliance for CRC per HEDIS was also estimated, and the incremental impact of adding HEDIS-eligible patients who had undergone CTC as their only CRC screening test was then evaluated for two similarly sized, regional Navy medical centers.

Across all sites (10 Army, 4 Navy, 3 Air Force), 17,187 CTC studies were performed, with increasing utilization during the 6-year study period. At the two Navy medical centers, screening compliance ranged from 33.8 percent to 67.9 percent without CTC and 33.8 percent to 84 percent with CTC.

"Our analysis demonstrates that CTC is being implemented with increasing frequency across military treatment facilities and that the inclusion of CTC in the currently defined NCQA numerator for CRC screening tests could improve HEDIS compliance metrics in the presence of an integrated CTC screening program," said Cash.

"Given the low rates of current HEDIS measures for CRC, it is important to expand this metric to include high-quality tests such as CTC that have the potential to significantly increase compliance with CRC screening guidelines and can be expected, over time, to contribute to further lowering of CRC-associated morbidity and mortality," said Cash.

Provided by American College of Radiology

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