Greetings,

In this edition of Message from the Chair, I am excited to update you on some initiatives happening around March - Colorectal Cancer Awareness month, our upcoming North Carolina Colorectal Cancer Roundtable (NC CRCRT) meeting and provide an update on the great work of the North Carolina Colorectal Cancer Roundtable task groups. The NC CRCRT looks forward to advancing our mission with the expertise of our Steering Committee Chair, members and partners to reduce colorectal cancer rates through prevention and early detection in North Carolina.

March is Colorectal Cancer Awareness Month! Colorectal cancer is one of only a few cancers that can be prevented by colorectal cancer screenings. Colorectal cancer is the second-leading cause of cancer death in both men and women in North Carolina. In March, we charge you and/or your organization to take an extra step in promoting the message of reducing the risk for this disease through screening. We are striving for 80% in every community!

We look forward to continuing to expand our partnership efforts and invite you to attend our upcoming NC Colorectal Cancer Roundtable Meeting Friday, March 15th from 10:00am-3:00pm at the American Cancer Society in Raleigh! During this meeting you will hear about our task groups progression, presentations from expert speakers in the colorectal cancer arena, and engage in robust conversation around colorectal cancer efforts happening in our state.

The North Carolina Colorectal Cancer Roundtable is a state coalition of public, private, and voluntary organizations, and invited individuals dedicated to reducing the incident of and mortality from colorectal cancer in North Carolina, through coordinated leadership, strategic planning, and advocacy.

This newsletter is disseminated three times a year providing updates on emerging issues around colorectal cancer. Please see our contact information if you are interested in becoming involved with the NC CRCRT or if you are interested in spotlighting an initiative around colorectal health in our newsletter.

Sincerely,

Marti Wolf, RN, MPH, PCMH, CCE
Chair of the North Carolina Colorectal Cancer Roundtable Steering Committee
## North Carolina Colorectal Cancer Roundtable Steering Committee Members

The NC CRCRT steering committee membership is growing and becoming more formalized, as we continue to expand our forum of colorectal cancer experts and advocates. Thank you for your continued commitment and support to reducing colorectal cancer rates in North Carolina! Each Steering Committee member represents their professional association.

### North Carolina Colorectal Cancer Roundtable Steering Committee List

<table>
<thead>
<tr>
<th>Member</th>
<th>Position/Role</th>
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<tbody>
<tr>
<td>Vacant</td>
<td>NC CRCRT Steering Committee Member</td>
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<tr>
<td>Nikki Hyatt, RN, BSN, OCN</td>
<td>Outreach Coordinator, Vidant Health-Greenville</td>
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<tr>
<td>John Lloyd</td>
<td>Survivor Colorectal Cancer Alliance Outreach Volunteer</td>
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<tr>
<td>Vacant</td>
<td>NC CRCRT Steering Committee Member</td>
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<tr>
<td>Melissa Clayton</td>
<td>Program Manager, NC Department of Medical Assistance</td>
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<tr>
<td>Glenn Field</td>
<td>Primary Care Systems Associate, NC Office of Rural Health</td>
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<tr>
<td>Deborah Fisher, MD</td>
<td>Associate Professor of Medicine, Duke Clinical Research Institute</td>
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<tr>
<td>Greg Griggs</td>
<td>Executive Vice President, NC Academy of Family Physicians</td>
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<tr>
<td>Tommy Jarrell, PhD</td>
<td>Director, Richmond County Public Health Department</td>
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<tr>
<td>Susan Kansagra, MD, MBA</td>
<td>Section Chief, Division of Public Health, Chronic Disease and Injury Section, North Carolina Department of Health and Human Services</td>
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<tr>
<td>Carol Koscheski, MD</td>
<td>Gastroenterologist, N.C. Society of Gastroenterology Representative</td>
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<tr>
<td>Suzanne Lea, PhD, MPH</td>
<td>Representative, NC Public Health Association</td>
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<tr>
<td>Debi Nelson</td>
<td>Executive Director, NC CRCRT NC Cancer Prevention and Control Branch Founding Member</td>
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<tr>
<td>Michael Newcomer, MD</td>
<td>Gastroenterologist, Asheville Gastroenterology Associates</td>
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<tr>
<td>Big Patiri, MD</td>
<td>Gastroenterologist, Digestive Healthcare</td>
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<tr>
<td>Steve Paterno, PhD</td>
<td>Professor of Medicine, Pharmacology and Cancer Biology, Duke University School of Medicine, Deputy Director, Duke Cancer Institute</td>
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<tr>
<td>Tom Wroth, MD</td>
<td>Senior Vice President and Chief Medical Officer, Community Care of NC</td>
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<tr>
<td>Larry Wu, MD</td>
<td>NC CRCRT Steering Committee Co-Chair, Medical Director, Blue Cross Blue Shield of NC</td>
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<tr>
<td>Jacqueline Wyman</td>
<td>Associate Director for Regional Support, NC Area Health Education Center</td>
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<tr>
<td>Stephanie Wheeler, PhD</td>
<td>Associate Professor, Health Policy and Management, University of North Carolina at Chapel Hill</td>
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<tr>
<td>Marti Wolf, RN, MPH, PCMH, CCE</td>
<td>NC CRCRT Steering Committee Chair, Clinical Director, NC Community Health Center</td>
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<tr>
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<td>with Dan Reuland, MD, MPH, Director of CCSI, University of North Carolina at Chapel Hill</td>
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Updated: 2.7.19

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### * Save the Date *

**NC CRCRT Meeting**

**March 15, 2019**

10:00 AM - 3:00 PM

American Cancer Society 8300 Health, Park Suite 10

Raleigh, NC 27615

For more information on the NC Colorectal Cancer Roundtable contact:

Nikita Spears, Comprehensive Cancer Program Coordinator at 919.707.5753 or Nikita_Spears@dhs.nc.gov
ACCESS TO CARE
CO CHAIR: DOROTHEA BROCK
CO CHAIR: TERI MALO

OVERVIEW:

The goal of this task group is to identify barriers for both uninsured and insured patients across North Carolina. This group brings together interested stakeholders across the state to identify these barriers and come up with solutions that will overcome these barriers for residents in NC who face them. They will work closely with the other task groups to help promote these solutions so that screening rates can increase, and we can reduce the burden of colorectal cancer in NC.

PROVIDER SYSTEM AND POLICY IMPROVEMENT
CO CHAIR: DR. LARRY WU
CO CHAIR: DR. CAROLL KOSCHESKI

OVERVIEW:

Provider, System and Policy Improvement Task Force (PSPI) encompasses the “Provider Education” and “Health Policy” Task Groups including connecting primary care physicians and gastroenterologists, screening options, billing/coding/reimbursement, how to reach uninsured populations, and patient navigation.

The NC CRCRT’s Provider, System and Policy Improvement (PSPI) task group has the following goals:

- Developing a Colorectal Cancer Screening Insurance document for patients.
- Identifying resources to assist the uninsured receive screening and treatment services.
- Developing a provider document to assist providers with identifying appropriate colorectal screening test based on risk factors, family medical history and patient choice.
- Exploring how to work with billing codes and reimbursement. (i.e., if a person receives a positive FIT test and needs a colonoscopy, the colonoscopy is billed as a part of the screening procedure and not a treatment procedure.)

Task Group Updates:

- PSPI has recommended updates to Colorectal Cancer Screening Position Statement to the North Carolina Advisory Committee on Cancer Coordination and Control; adopted at its last meeting.
- PSPI is working with the NC Society of Gastroenterology (NCSG) on recruiting GIs to assist with statewide screening for colorectal cancer.
- Adopted screening algorithm that promotes FIT testing or colonoscopy for low risk patients. FIT testing as an alternative increases screening rates. General framework is as follows:
  1. FQHCs as the screening hub performs FIT and risk stratification.
  2. High risk patients are referred directly to community physicians who have volunteered to perform colonoscopies, similarly positive FIT are referred for colonoscopy as well.
  3. Funding maybe required for a.) training, b.) navigation for the patient, and c.) payment for facility/ancillary for colonoscopy and cancer care.
  4. Will require local support by physicians performing colonoscopies and local facilities to work with FQHCs
     a) Identify regions where there are not identified colonoscopy resources.
     b) We signed up several GIs at the (NCSG) meeting in Feb 2019, interested in being champions.
- For insured patients, two major insures will begin to cover colonoscopy as preventive after + FIT, working with the NC CRCRT.

PUBLIC EDUCATION & OUTREACH
CHAIR: KYLIE S. DIAZ

OVERVIEW:

The Public Education and Outreach Task Group works to bring awareness to residents of NC about the importance of colorectal cancer screening. Knowing that colorectal cancer is 90% preventable through proper screening, this group works collaboratively to get this message out to the public and drive residents of NC, who are eligible screening age to their primary care doctor and/ or somewhere they can find a primary care doctor if they do not have one, to speak with a physician about the various types of colorectal cancer screening and the guidelines.

The Public Education and Outreach Task Group is preparing for Colorectal Cancer Awareness Month in March 2019. Members are exploring ways to recognize organizations that signed the 80% by 2018 Pledge. The 2019 Colorectal Cancer Awareness Month Proclamation has been accepted and published by the Governor’s Office. Finally, members also developed an outline of content for the future development of the NC CRCRT website.
March is “Colorectal Cancer Awareness Month”

1. N.C. Division of Public Health, Cancer Prevention and Control Branch, Comprehensive Cancer Control Program

Duke Energy Center for the Performing Arts located at 2 E South St, Raleigh, NC 27601 has again partnered with us to go blue to raise awareness for Colorectal Cancer Awareness Month. They have agreed to light there building blue for the month of March 2019. Please ride by to see the building if your time permits.

2. 2019 Colorectal Cancer Awareness Month Proclamation - State of North Carolina
Roy Cooper, Governor of the State of North Carolina, proclaimed March 2019 as Colorectal Cancer Awareness Month in North Carolina, and commend its observance to all citizens.

3. Action for You – NC CRCRT
Contact your local physicians/partnering agencies and city officials to promote prevention/early detection and go blue in support of Colorectal Cancer Awareness month. Additional resources are listed below.

General Colorectal Cancer Resources

4. Colorectal Cancer Awareness Month Social Media Toolkit 2019
George Washington Cancer Center has created a Colorectal Cancer Awareness Month Social Media Toolkit. Use this toolkit to promote education around colorectal cancer prevention, diagnosis, treatment, and survivorship to support those affected by colorectal cancer. Communicate messages throughout the month of March and throughout the year. This toolkit also covers best practices for social media. Click on the link below to access the colorectal cancer social media toolkit.


5. Launch of the National Colorectal Cancer Roundtable’s “80% in Every Community” campaign
The National Colorectal Cancer Roundtable (NCCRT), Fight Colorectal Cancer (Fight CRC), the American Cancer Society (ACS), Mayo Clinic, Exact Sciences, and UPS are once again joining forces during Colorectal Cancer Awareness Month with partners around the country to launch our next campaign to reach an 80% colorectal cancer screening rate nationwide. This national signature event and live online broadcast will take place in Atlanta, Georgia, on March 7, 2019. They will not only celebrate national achievements and outstanding contributions to the cause but also emphasize the areas where they must continue to reach into in order to achieve an 80% colorectal cancer screening rate in every community.
Register for the Live Event and Livestream Broadcast

6. CDC Screen for Life Resource Toolkit
This toolkit provides printed materials, public service announcements, personal screening stories, colorectal cancer quiz and much more. Click on the link below to access the Toolkit
https://www.cdc.gov/cancer/colorectal/sfl/toolkit/?s_cid=govD_ColorectalCancer2017_02

7. National Colorectal Cancer Roundtable Resource Center – includes resources for every setting (community, provider, policymaker, workplace, etc.); intervention type, resource type, media type, etc.
http://nccrt.org/resource-center/

8. American Cancer Society Colorectal Cancer Webpage – provides information about colorectal cancer, causes, risk factors, prevention detection, and treatment information. The website is also available in Spanish by clicking a link.