

NYS Cancer Consortium Chronicle

New York State Cancer Consortium

Spread the Word: Eligibility Guidelines for the Medicaid Cancer Treatment Program

As of November 1, 2008, women screened and/or diagnosed with breast or cervical cancer by a provider who is **not** credentialed through the Cancer Services Program is eligible for application under the Medicaid Cancer Treatment Program (MCTP). The woman must have a diagnosis in need of treatment and must meet all other MCTP requirements. For a list of these requirements, visit: <http://www.health.state.ny.us/nysdoh/bcctp/bcctp.htm>. The guidelines for eligibility are under extensive review and will be distributed upon completion. Stay tuned for more information!

NYS Budget Crunch-ing on Cancer Screening Program?

The NYS Cancer Services Program provides age-appropriate breast, cervical and colorectal cancer screening for uninsured and underinsured women (and men). The 2009-10 appropriation for these services was \$3 million higher than the 2008-09 appropriation, but the program continues to struggle to provide screening services to all eligible women and men.

With a state budget deficit in the billions of dollars, the governor and legislature are working on a plan to address revenue shortfalls in the current year and next year (which begins on April 1, 2010). Advocacy groups are working hard to protect this much needed cancer screening program, even as the program redoubles efforts to reach women most in need and meet the Centers for

Disease Control and Prevention (CDC) guideline of dedicating 75 percent of breast cancer screening resources to priority women aged 50-64. Proposed budget cuts in the current year and possibly next year threaten to compromise the program's effectiveness and limit its reach.

Stay tuned for updates on this important issue.

National Research Study Recruitment Registry!

In early November, the National Institutes of Health announced the creation of ResearchMatch.org. This Nationwide registry is the first of its kind, linking volunteers with researchers. This not-for-profit, secure website, allows people interested in research participation to be matched with studies that suit them.

This site is the product of a collaboration of the national network of medical research institutions affiliated with the Clinical and Translational Science Awards (CTSAs).

The site is free and easy-to-use, allowing volunteers to connect with researchers from a wide range of diseases. Recent NIH data shows that only about 4% of the US population has participated in clinical trials and 30% of trial sites fail to enroll a single patient. ResearchMatch was created to improve that percentage and the number of research studies nationwide that are completed.

How does it work?

A volunteer living in the US would register. Infor-

mation is saved and protected until the volunteer authorizes their contact information to a specific study that interests them. The volunteer is notified when they are a possible match and they decide whether or not to release any of their private information. This site, unlike Clinicaltrials.gov, matches the volunteer with the researcher, rather than having a volunteer pick research that is of interest to them.

Currently, only researchers affiliated with CTSA

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National Research Study Recruitment Registry (Cont'd)

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institutions may use ResearchMatch, but plans are in place to extend availability beyond CTSA by 2011. There are 52 institutions associated with CTSA that are part of the ResearchMatch network. (http://ncrr.nih.gov/clinical_research_resources/clinical_and_translational_science_awards/researchmatch for a complete list)

To learn more about ResearchMatch, visit: www.researchmatch.org.

Membership Musings...

The NYS Cancer Consortium is pleased to welcome Reid Perkins to the NYSCC Steering Committee. Ms. Perkins is the Executive Director of the NYS Association for Rural Health. The NYSCC has grown to 257 members across New York State.

Please be sure to update your membership information by completing the new Membership Application form. This form can be found at www.NYSCancerConsortium.org. Scroll to the bottom of the home page and click "Join Today".

Cancer Survivorship Listserv

The New York State Cancer Services Program's Cancer Support and Survivorship Initiative announced the creation of a listserv focusing on various cancer survivorship issues. This listserv offers the opportunity for participants to learn about and share a wide array of information regarding cancer survivorship in New York State with others in the survivorship community. Those interested in joining should contact Mary Catherine Daniels, Cancer Survivorship Coordinator, at mcd10@health.state.ny.us.

New Cancer Screening Guidelines and Recommendations

Cervical Cancer Screening

The American College of Obstetricians and Gynecologists has released newly revised guidelines saying that women should have their first cervical cancer screening at 21 and be re-screened less frequently than previously recommended. These revised recommendations say most women under 30 should be screened every two years using the standard Pap or liquid-based cytology screen, rather than the previously recommended yearly screening. Women 30 and up with three consecutive negative cervical cytology tests may be screened once every 3 years with either the Pap or liquid-based cytology test. More frequent screenings are recommended for those with certain risk factors, including those with HIV and those treated for cervical intraepithelial neoplasia (CIN) 2, CIN 3 or cervical cancer. For more information, please read the entire ACOG Press Release at: http://www.acog.org/from_home/publications/press_releases/nr11-20-09.cfm

United States Preventive Services Recommendation State-

ment for Breast Cancer Screening

The United State Preventive Services Task Force (USPSTF) is an independent panel of experts in prevention and primary care appointed by the federal Department of Health and Human Services that systematically reviews the evidence of effectiveness and develops recommendations for clinical preventive services.

Summary of the 2009 USPSTF Recommendation Statement

The 2009 USPSTF recommendation statement recommends against routine screening mammography in women at average risk for breast cancer who are 40-49 years of age. This recommendation statement encourages women in this age group to discuss the benefits and harms related to breast cancer screening with their health care provider to determine whether breast cancer screening is right for them.

The 2009 USPSTF breast cancer screening recommendation statement recommends biennial (every other

year) screening with mammography for women between the ages of 50-74 years.

The USPSTF concludes that there is not enough information to determine the additional benefits and harms of screening mammography in women 75 years or older.

The USPSTF recommends against teaching breast self-examination (BSE).

The USPSTF concludes that the current evidence is insufficient to assess the additional benefits and harms of clinical breast examination (CBE) beyond screening mammography in women 40 years or older.

The USPSTF concludes that the current evidence is insufficient to assess the additional benefits and harms of either digital mammography or magnetic resonance imaging (MRI) instead of film mammography as screening modalities for breast cancer.

December 2009

Schedule of Events

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3 <i>Roundtable Discussion</i>	4	5
6	7	8 <i>Radon Webinar</i>	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

- December 3rd — 6pm— “How Healthcare Reform May Affect Those with Breast or Ovarian Cancer”: Roundtable Discussion in Manhattan featuring prominent legislators and advocates. Registration is required (health care reform in subject line) to: mmazina@sharecancersupport.org.
- December 8th — 2pm-3:30pm— “Radon T: World Trek 2010”: Radon Webinar. Project seeks to blend social media technology with grassroots organizing to increase social awareness about radon and support CanSAR. Registration is required at <https://www1.gotomeeting.com/register/443165873>.

Calendar events are fully posted on our website, so check it out for more information!

Cancer Patients and Survivors: What to Know about the Flu

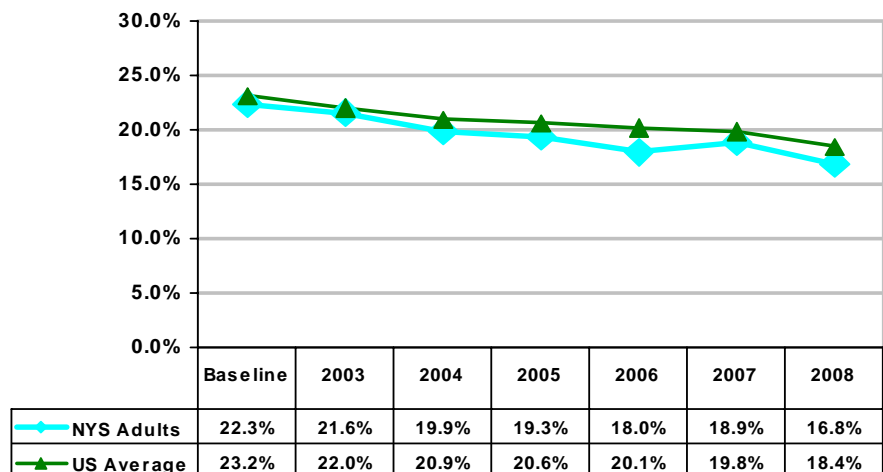
The Center for Disease Control’s Division of Cancer Prevention and Control is now answering questions about seasonal and 2009 H1N1 flu. www.cdc.gov/cancer/flu is aimed at cancer patients and providers to help prepare for the flu as living with cancer increases a person’s risk for complications from the flu.

State of the Plan: Health Promotion & Disease Prevention An Update on Tobacco Control in New York State

Tobacco use and exposure is the leading preventable cause of death in the United States. The American Cancer Society (ACS) estimates that 60% of cancers could be avoided if people stopped using tobacco and adopted healthier lifestyles. The New York State Comprehensive Cancer Control Plan has two goals related to tobacco use: (1) By 2010, reduce tobacco use by adolescents to 12% and (2) By 2010, reduce tobacco use by adults to reduce tobacco use to 15% for cigarette use, 0.4% for spit tobacco use, and 1.2% for cigar use. Since the implementation of the NYSCCCP, cigarette use

among adolescents and adults in New York State has continually declined and New Yorkers are

smoking at rates lower than national averages.



State of the Plan: Health Promotion & Disease Prevention

An Update on Tobacco Control in New York State

Tobacco Related Policies & Legislation

Cigarette Taxes

New York State has the second highest tax in the United States at \$2.75 a pack and in January 2009, a new bill was introduced that proposes an increase in the state tax on a pack of cigarettes to \$3.50 which would make it the highest in the nation. [New York AB 3300, AB 8028, SB 4036] (Filed & sent to committee on Ways and Means, 1/26/09; held in committee as of 9/6/09). New York City has its own additional \$1.50 local cigarette excise tax, bringing the total tax to \$4.25 across the five boroughs which is the highest local tobacco tax in the US. In 2008, Governor Patterson signed new legislation to combat cigarette tax evasion that prohibits cigarette manufacturers from shipping cigarettes to any wholesale dealer unless the dealer certifies the cigarettes will not be sold tax-free. Non-Indians purchasing cigarettes through Indian Nation venues will have to pay the tax; although American Indians will still be able to purchase cigarettes tax-free on reservations. On April 1, 2009 the federal cigarette excise tax increased to \$1.00 as part of the State Children's Health Insurance Plan (SCHIP) bill that was signed into law by President Obama on February 4, 2009.

State Smoking Restrictions

The Clean Indoor Air Act 2003 currently prohibits smoking of tobacco (herbal cigarettes are exempted) in nearly all public and work places including childcare facilities, restaurants, bars, and retail stores. Exemptions are allowed for cigar bars in existence prior to December 31, 2002, and for organizations that do not have employees. Municipalities may enact local laws that are stronger than the state law. For example, Rockland County has prohibited smoking in motor vehicles when children under the age of 18 are present. Many municipalities have enacted smoking bans in outdoor areas such as playgrounds, parks, and beaches. In addition, New York State has issued regulations to become the first state in the nation to require all state-run addiction treatment centers (both inpatient and outpatient) to prohibit smoking in their facilities and on their grounds and offer smoking cessation services to their clients. In July 2008, legislation was passed that makes all dormitories in public and private colleges and universities in New York state smoke-free. To date there are 14 colleges in New York that have established a 100% smoke-free campus policy where no smoking is allowed on campus property. The American Lung Association of New York report "*Tobacco on Campus: Smoking Policies of New York Colleges*" summarizes selected New York State colleges smoking policies and can be found at <http://www.lungusa.org/associations/states/new-york/reports/assets/tobacco-on-campus-fact-sheet.pdf>.

In New York State the work done by the Department of Health's Tobacco Control Program has successfully low-

ered smoking rates across age groups. The program has also been instrumental in the implementation of several key policies such as the Clean Indoor Air Act and the increases in cigarette excise taxes. The Tobacco Control Program also operates a statewide Quitline and 19 Cessation Centers located throughout New York. For more information please visit the New York State Department of Health Tobacco Control Program website at: http://www.health.state.ny.us/prevention/tobacco_control/

Although New York State continues to lead the way in policies and programs that promote smoking cessation further work and continual support of the state Department of Health's Tobacco Control program will ensure that tobacco use rates will continue to decline for both adults and adolescents. The NYS Cancer Consortium efforts are underway to support tobacco control in NYS with the development of the newly defined re-focus areas. To become involved in the Cancer Consortium's Tobacco Control work group please contact nyscccp@cancer.org

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"Working Together, Reducing Cancer, Saving Lives"

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