



## **Conversation 5: How Do We Move Forward with Cancer Prevention and Early Detection in the Changing World of Coverage for Health Care?**

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### **Practical Actions**

- Work with federally qualified health centers to increase cancer screenings.
- Use creative strategies to raise funds for cancer prevention and early detection, e.g. tobacco taxes and license plate funding.
- Offer mobile radiology units with low-cost screening in rural areas (using physician champions).
- Tap into hospital community benefit requirements; encourage meaningful investments (e.g. donated screening services) rather than simple outreach (e.g. brochures).
- Work with residency clinics.
- Create a funding mechanism for providing patient navigation and education.
- Institute quality patient navigation programs.
- Develop quality standards for screening, medical services and insurance products.
- Develop standard operating procedures for primary care providers.
- Capturing survivor and early detection and prevention stories to share with patients.
- Advocate for increased price transparency (in clinical settings and from insurers).

### **Briefly describe the current climate around cancer prevention and early detection coverage in your workplace or community.**

- Lack of support/resources.
- Focus on certain cancers while other cancers are overlooked (i.e. lung).
- Climate slow to change.
  - KY Smoking bans.
- Medicaid is not used in rural areas and for preventive services.
- Educating providers about what Medicaid covers.
- Balancing act of allocation.
- Access to coverage, but unable to cover financial costs.
- Health Literacy (insurance literacy)
- Zero sum game.
- Quality of care.
- Culture of fatalism.

- Standardization is needed (insurance, language and standardized screening guidelines).

**What are the current challenges of cancer prevention and early detection programs or practices in your community or practice at this time of uncertainty about health care coverage?**

- Access to coverage but not using Medicaid or other insurance.
- Educating people on benefits available to them.
- Not knowing the out of pocket costs.
  - Coding system (coverage not interpreted correctly)
- Covered but cannot afford services.
- Fear of not being able to afford costs.
- Inadequate or grandfathered plans.
- Patient education takes time with refugee populations.
- Access to providers for Medicaid due to paperwork and/or financial barriers.
- Value of services (prevention not valued).
- Service for a new demographic of older individuals.
- Lack of federal and state funding.

**Parking Lot for other topics**

- Focus on lung cancer disparities.