

STATE HEALTH POLICY to

ADVANCE CANCER PREVENTION

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DISCLOSURES

Employed by the University of Florida, which receives funding from

- Florida Medicaid in the Agency for Health Care Administration (AHCA),
- Florida Department of Health, and
- philanthropic foundations.

Remarks today are my own.

CANCER PREVENTION

POPULATION HEALTH PERSPECTIVE

Individual Behaviors

- Awareness & Literacy
- Choice
- Socioeconomic Needs

Systems & Environments

- Exposure to Risks
- Access to Care
- Quality of Care
- Equity (risk, ID, Rx, f/u)

Mental Health

- Depression
- Anxiety

- ❑ Tobacco prevention and cessation
- ❑ Physical Activity
- ❑ Obesity
- ❑ Dietary Fiber, not Processed Red Meat
- ❑ Alcohol
- ❑ *Helicobacter pylori* treatment
- ❑ Vaccinations against HPV and HBV
- ❑ Treatment of HBV, HCV, and HIV (PrEP)
- ❑ Colorectal polyp removal
- ❑ Cervical dysplasia removal
- ❑ Ultraviolet (UV) light avoidance
- ❑ Chemoprevention with aspirin?

PREVENTING CANCER in POPULATIONS

01

Policy

State and community health policy planning.

02

Data

Informing population health and disease risk mitigation.

03

Finance

Incentivizing prevention with financial instruments.

POLICY OPPORTUNITIES

1. State Cancer Plans
2. State Health Improvement Plans
3. Tobacco Control – FDA, work-arounds to state pre-emption
4. Social Determinants of Health (SDOH) (i.e., Food, Transport, Housing, Education, Vocational Training)
5. Broadening Definition of Health Equity by including disease risk (*i.e.*, genetically predisposed)
6. Workforce Capacity for Individual and Population Risk Mitigation
7. Health in All Policies
8. Multiple Risks and Co-Morbidities - Mental Health, Cardiovascular
9. Policy Toolkits & Implementation Collaboratives

DATA OPPORTUNITIES

1. County Health Rankings: WISC.edu & RWJ F ↔ County HD's
2. Digital Quality Measures (dQM) on risk mitigation: NCQA
3. Move to real time data to enable rapid-cycle change.
4. Multipayer claims data linked to cancer registries.
5. Convert cancer registries from depot to information exchange back to providers and payers (i.e., CIN2/3, polyps).

FINANCE OPPORTUNITIES

1. Convert prevention into procedures like mammography.
2. Performance Measures in health plan contracts.
3. Electrify performance measures with Rewards and Penalties.
4. Chronic Disease Management Programs (42 CFR § 422.152(c))
5. Healthy Behavior programs on Tobacco, Healthiest Weight, Alcohol
6. Quality Assessment and Performance Improvement (QAPI) programs (42 CFR § 416.43, § 438.330)
7. Activities that meet minimum Medical Loss Ratio (MLR) (42 CFR § 423.2430)
8. Value Based Insurance Design.

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