

CANCER PREVENTION AND TREATMENT DEMONSTRATION FOR ETHNIC AND RACIAL MINORITIES

The Medicare Cancer Prevention and Treatment Demonstration for Racial and Ethnic Minorities used a randomized control design to study the impact of various evidence based, culturally competent models of patient navigator programs designed to help minority beneficiaries navigate the healthcare system in a more timely and informative manner and facilitate cancer screening, diagnosis and treatment to improve healthcare access and outcomes, as well as lower total costs to Medicare. Approximately 12,700 Medicare fee-for-service beneficiaries were eligible to be enrolled in the study during this four-year project.

Background

Congress authorized the *Cancer Prevention and Treatment Demonstration for Ethnic and Racial Minorities* in Section 122 of the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000. The goals of the demonstration were to:

- Improve the quality of items and services provided to target individuals in order to facilitate reduced disparities in early detection and treatment of cancer;
- Improve clinical outcomes, satisfaction, quality of life, and appropriate use of Medicare-covered services and referral patterns among those target individuals with cancer;
- Eliminate disparities in the rate of preventive cancer screening measures; and
- Promote collaboration with community-based organizations to ensure cultural competency of healthcare professionals and linguistic access for persons with limited English proficiency.

Study Design

On April 3, 2006, CMS awarded four-year cooperative agreements to 6 demonstration sites (see table below), which together served approximately 6,000 minority Medicare beneficiaries in seven states to overcome barriers in the screening, diagnosis, and treatment of cancer. Approximately the same number of Medicare beneficiaries served as control participants in the study.

These sites began recruiting people with and without cancer in their communities in September 2006. For people without cancer, the sites offered patient navigator services to facilitate screening and diagnosis for breast, cervical, colorectal and prostate cancer. Sites also recruited people who had any of these cancers or lung cancer for treatment facilitation services provided by a patient navigator as well. This demonstration used a randomized control design to allow evaluators to draw scientific inferences from study results.

What is a Patient Navigator?

While the demonstration sites varied in the implementation of their navigator models, proposed facilitation services included: assistance in scheduling appointments with culturally sensitive caregivers, providing transportation assistance, coordination of care among providers, arranging

for translation/interpretation services, as well as providing other services to overcome the barriers encountered during cancer care.

CMS Payment

CMS provided the demonstration sites a payment for each cancer status assessment administered to all participants, and a monthly capitation payment for cancer screening, diagnosis, and treatment facilitation services for each beneficiary enrolled in the intervention group. The sites proposed the payment amounts on the basis of the costs of their respective interventions. Sites were also awarded a \$50,000 grant for startup funds to begin the demonstration.

Demonstration Locations

Target Population	Demonstration Awardee	Demonstration Location	Target Enrollment*
American Indian	Huntsman Cancer Institute	Montana & Utah	1800
Asian American/ Pacific Islander	Molokai General Hospital	Molokai, Hawaii	578
Hispanic (<i>Mexican American</i>)	M D Anderson Cancer Center	Harris County & Houston, Texas	2812
Hispanic (<i>Puerto Rican, Cuban</i>)	New Jersey Medical School	Newark, New Jersey	1,384
African American	Johns Hopkins University	Baltimore City, Maryland	2200
African American	Josephine Ford Cancer Center	Wayne, Oakland, Macomb counties (includes Detroit), Michigan	4000+
<i>Total target enrollment (includes both control & intervention group enrollees)</i>			<i>12,774</i>

Current status

The service delivery phase of the *Cancer Prevention and Treatment Demonstration for Ethnic and Racial Minorities* ended December 31, 2010. Upon CMS receipt of the sites' final project reports, this demonstration will be completed as of March 31, 2011.

Evaluation

CMS awarded a contract to RTI International to conduct an independent evaluation of this demonstration. CMS will report to Congress on the final results of this demonstration in mid-July 2012.