

**Attachment 2. Summary of Eligibility for CRC Screening in the
CDC Colorectal Cancer Control Program
April 2010**

Character-istic	Eligible for Colonoscopy (Screening or Surveillance)	Ineligible for Program
Residence	Baltimore City resident <ul style="list-style-type: none"> ▪ Verbal report to verify residence 	Residence address outside of Baltimore City
Income	Household income \leq 250% of the Federal Poverty Guideline (FPG) <ul style="list-style-type: none"> • Verbal report to verify income 	Household income >250% of the FPG
Insurance Status	<ul style="list-style-type: none"> • Uninsured • Medicare part A only • Insured but no coverage for CRC screening procedures 	<ul style="list-style-type: none"> • Medicare parts A&B • Medical Assistance • Insured with coverage for CRC screening (program cannot pay co-pays or deductibles. Even if client meets income criteria and does not have money to pay co-pay or deductible, the client is not eligible.)
Age and Risk Factors	<p>50—64 years and at average risk of CRC Average risk is defined as:</p> <ul style="list-style-type: none"> • no personal or family history of CRC or adenomas; and • no personal history of Inflammatory Bowel Disease (IBD), FAP or HNPCC, endometrial or ovarian cancer <p>18—64 years if increased risk of CRC due to the following:*</p> <ul style="list-style-type: none"> • personal history of colorectal adenomas or polyps of unknown type • personal history of CRC previously diagnosed <i>outside</i> of the program who are asymptomatic and have had curative treatment • CRC diagnosed within the program • personal history of ovarian or endometrial cancer • family history of first degree relative with CRC, adenomas or polyps of unknown type <p>65+ years with DHMH approval</p> <p><i>*See Attachment 1 for age to begin screening in those at increased risk</i></p>	<ul style="list-style-type: none"> • <18 years old • IBD (ulcerative colitis or Crohn’s disease)** • Personal history of Familial Adenomatous Polyposis (FAP) or Hereditary non-polyposis colorectal cancer (HNPCC) • Family history of FAP or HNPCC in first degree relative • 18-49 with history of hyperplastic polyps • 65+ years unless approved by DHMH <p>** people with non-specific “colitis” may be eligible if confirmed that they have not had IBD</p>
Health Status and Advanced Age	<ul style="list-style-type: none"> • Healthy people • People with co-morbid medical conditions (for example, severe heart or lung disease) and people of “advanced age” <i>if cleared by medical provider for colonoscopy</i> 	<ul style="list-style-type: none"> • People whose medical provider doesn’t clear for screening colonoscopy because of co-morbid conditions or advanced age • Co-morbid conditions that require procedures that are beyond the capability of the program to gain clearance for colonoscopy (for example, cardiac treadmill test; pulmonary function tests, extensive blood work, etc.)

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Symptom s/ Signs	<ul style="list-style-type: none"> Signs and symptoms NOT listed in column to the right as Ineligible for the program exclusions; signs and symptoms <i>if cleared by medical provider for colonoscopy</i> as NOT being suggestive of CRC 	<p>Anyone with the following:</p> <ul style="list-style-type: none"> Rectal bleeding, bloody diarrhea, or blood in the stool within the past 6 months (bleeding that is known or suspected to be due to hemorrhoids after clinical evaluation would not prevent a client from receiving CRC screening services); Prolonged change in bowel habits (e.g., diarrhea or constipation for more than two weeks that has not been clinically evaluated); Persistent abdominal pain; Symptoms of bowel obstruction (e.g., abdominal distension, nausea, vomiting, severe constipation); Significant unintentional weight loss of 10% or more of starting body weight; or Mass in the abdomen or rectum on physical exam.
Past screening	<p>Provided the client meets the above residency, income, insurance, risk history, health, and symptom eligibility criteria, the person shall be eligible for colonoscopy if s/he:</p> <ul style="list-style-type: none"> Was never screened for CRC in past; Is at average risk and had: <ul style="list-style-type: none"> Colonoscopy in past with no CRC or adenomas found <i>and it has been at least 10 years</i> since last colonoscopy; Flexible sigmoidoscopy or double contrast barium enema (DCBE) negative for polyps or CRC <i>at least 5 years</i> ago; Negative FOBT <i>at least 1 year</i> ago and no colonoscopy, flexible sigmoidoscopy, or DCBE that would exclude the person; Is at increased risk and needs screening or surveillance colonoscopy: <ul style="list-style-type: none"> Family history of CRC or adenoma(s) (see Attachment 1 for age and interval). Personal history of colonoscopy in past with finding of adenoma(s) or unknown type of polyps, now in need of repeat colonoscopy (See Attachment 1 for eligible interval). Was screened with <i>inadequate colonoscopy</i> within the Program 	<ul style="list-style-type: none"> Past positive flexible sigmoidoscopy or DCBE now needing diagnostic testing <i>Up to date screening</i> with either colonoscopy, FOBT plus flexible sigmoidoscopy, sigmoidoscopy or DCBE according to the Program Guidelines—See Attachment 1: <ul style="list-style-type: none"> Negative FOBT in past year flexible sigmoidoscopy or DCBE within past 5 years; Colonoscopy with colonoscopy recall date (per Program Guidelines--See Attachment 1) <i>later</i> than the date of proposed screening/surveillance in the City program Recent positive FOBT