

City Health Information

New York City Department of Health and Mental Hygiene

June 10, 2022

Dear Colleague,

Due to the COVID-19 pandemic, many New Yorkers delayed or avoided their cancer screenings.

Cancer is the leading cause of death among New Yorkers who are aged younger than 65 years.¹ Missed cancer screenings can lead to later diagnosis of more advanced cancers, which are harder to treat and have higher mortality rates.²

Between March 2020 and November 2021, approximately 40% of adults in New York City (NYC) who knew they were due for a cancer screening avoided or delayed it.³ An estimated 376,000 New Yorkers due for a breast cancer screening delayed or avoided it, and as of November 2021, 93,000 still had not scheduled the screening. Approximately 201,000 New Yorkers due for a colon cancer screening delayed or avoided it, and 133,000 still had not scheduled the screening as of November 2021.

Non-Hispanic Black New Yorkers have higher age-adjusted cancer mortality rates than other racial/ethnic groups for multiple cancers including colorectal, breast, cervical, and prostate cancer, and one of the highest rates for lung cancer (unpublished data, 2014-2018 Vital Statistics, NYC Department of Health and Mental Hygiene [DOHMH]).¹ The COVID-19 pandemic has highlighted how these and many other health inequities are rooted in structural racism.⁴⁻⁶ In the recent Omicron surge, non-Hispanic Black New Yorkers were hospitalized with COVID-19 at more than twice the rate of White New Yorkers.^{7,8} Negative experiences such as discrimination in health care settings, in addition to the pandemic's overall effect on cancer screenings that are delayed and avoided, could potentially exacerbate the racial inequities in cancer mortality in the coming years.

To reduce the burden of undiagnosed cancer and decrease racial inequities in deaths from cancer, the NYC DOHMH urges you and your staff to immediately:

- Enhance patient engagement using electronic health records (EHR) decision support tools to identify those who are due for screening and
 - Send reminders using mail, telephone calls, or text or email that is compliant with the Health Insurance Portability and Accountability Act (HIPAA).
 - Discuss cancer screening eligibility, benefits, risks, and screening options at their visit, especially for Black patients because of high cancer mortality rates among Black New Yorkers.
 - Ensure follow-up with patients who were screened to review results (eg, communicate by patient portal or phone call, schedule follow-up visit when you order screening).
- Use your EHR to monitor your screening rates overall and across racial/ethnic groups to address inequities.

For current US Preventive Services Task Force cancer screening recommendations, including age ranges and eligibility, visit www.uspreventiveservicestaskforce.org. Recent updates include starting colorectal cancer screening at age 45 years instead of age 50 years and starting lung cancer screening for people who qualify because of their smoking history at age 50 years instead of age 55 years. Keep in mind that screening recommendations can vary depending on individual risk.

Cancer screening is covered by Medicaid, Medicare, and most insurance plans, although parameters

may vary. Patients without insurance can call 311 or text “CoveredNYC” to 877-877 for access to low- or no-cost coverage. The New York State Cancer Services Program provides free breast, cervical, and colorectal cancer screenings at participating health care sites. Visit www.health.ny.gov/diseases/cancer/services or call 866-442-CANCER (2262) for details.

For more information, including patient education materials, visit nyc.gov/health and search “cancer prevention.”

In addition to delays in cancer screening, there have been many other disruptions in health care over the past two years, including care for chronic conditions such as hypertension and diabetes, that can have significant consequences for patients. You have an important role to play in helping patients catch up on their care. Encourage your patients to reconnect with you and their other health care providers.

Working together, we can improve the health of all New Yorkers.

Sincerely,

Ashwin Vasani, MD, PhD

Commissioner

NYC DOHMH

References

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