

Ohio Comprehensive Cancer Control Plan 2021-2030

Topics and Objectives

This document presents the objectives developed for the 2021-2030 Ohio Cancer Plan. Eighteen topical workgroups met between March – June 2020 to develop and submit objectives for consideration in the next Cancer Plan. This document presents all objectives that were reviewed by the Cancer Plan Revision Workgroup and were approved or are currently under revision. Objectives are categorized by topic area using categories of the current Plan, but please note that these categories may change in the new Plan. The table of contents allows you to move directly to a specific topic or objective.

* = **New topics** (not included in the 2015-2020 Cancer Plan)

^ = Objectives **under revision**

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PRIMARY PREVENTION

Cancer genetics

Objective 1: By December 31, 2030, increase by 20% the yearly overall number of individuals who receive **Ohio Cancer Genetic Network Cancer Risk Assessment services**. [Baseline: 12,358; Target: 14,830; Midpoint (5-year) yearly target: 13,594]

Nutrition

Objective 1: Decrease the percent of **high school students who did not eat vegetables** (excluding french fries, fried potatoes or potato chips) during the past 7 days from 8.7% to 7.7%.

Objective 2: Decrease the percent of **high school students who did not eat fruit or drink 100% fruit juices** during the past 7 days from 10.6% to 9.6%.

Obesity

Objective 1: Increase the percentage of Ohio **adults with a healthy weight** (BMI 18.5-24.9) from 30% to 32%.

Objective 2: Increase the percentage of Ohio **high school students (grades 9-12) with a healthy weight** (BMI 18.5-24.9) from 61% to 63%.

Physical activity

Objective 1: Decrease the percent of **adults**, age 18 and older, reporting **no leisure time physical activity** from 29.6% to 26%.

Objective 2: Increase the percent of **children**, ages 6 through 11, who are **physically active at least 60 minutes per day** from 29% to 35%.

Radon

Objective 1: By December 31, 2030, increase the number of **radon mitigation systems** installed in Ohio homes (in a 10-year period) by 100,000 new radon mitigation systems.

Tobacco

Objective 1: By December 2030, decrease the percentage of Ohio **adults** aged 18 years or older who report **current tobacco/nicotine use** from 27.6% to 22.1%.

Objective 2: By December 2030, decrease the percentage of Ohio middle and high school **youth who use tobacco/nicotine** by 20% from baseline.

Objective 3: By December 2030, Ohio's **Comprehensive Smoke-Free Law** will be expanded to include all grounds owned by the State of Ohio.

Objective 4: By December 2030, increase the **cigarette excise tax** and **tax on e-cigarette vaping taxes** such that Ohio's ranking will increase from 27th (2020) to at least 15th.

Objective 5: By December 2030, decrease existing **smoking disparities** in Ohio adult populations by 20% from baseline.

UV exposure/Skin cancer

Objective 1: Increase **reporting of melanoma** cases (baseline is 3,343 cases reported in 2017) by 5% (to 3,510 cases) by December 31, 2026 and 10% (to 3,677 cases) by December 31, 2030.

Objective 2: Increase **education of Ohio youth** about skin cancer prevention (and/or reducing UV exposure) through partnerships with 3 organizations that serve youth by December 31, 2030.

Objective 3: By December of 2030, restrict the use of **tanning devices** for those under the age of 18, with no exemptions, by supporting state-wide and/or federal legislation as measured by passage of a law that meets model language.

EARLY DETECTION

Breast cancer detection

Objective 1: By December 31, 2030, increase **breast cancer screening** in accordance with USPSTF recommendations among women age 50-74 from 78% in 2018 to 95%.

Objective 2: By December 31, 2030, increase the proportion of breast cancer **detected at a local stage** from 72.5% in 2017 to 80%.

Objective 3: By December 31, 2030, increase the percentage of women 50 to 74 years of age on **Ohio Medicaid** managed care plans, who had a **mammogram** from 53.7% to 70%.

Cervical cancer detection

Objective 1: By December 31, 2030, increase the percentage of women aged 21-65 who receive **cervical cancer screening** especially among disparate populations including Appalachian and Hispanic women, based on USPSTF recommendations, which includes women aged 21-29 years screened for cervical cancer every 3 years with cervical cytology alone; and women aged 30 – 65 years screened for cervical cancer every 3 years with cervical cytology alone, every 5 years with high-risk human papillomavirus (hrHPV) testing alone or every 5 years with hrHPV testing in combination with cytology (cotesting).

Objective 2: By December 31, 2030, decrease the percent of women diagnosed with cervical cancer at **regional and distant stage of diagnosis**, especially among disparate populations.

Objective 3: By December 31, 2030, reduce the rate of women with **invasive cervical cancer** (per 100,000), especially among disparate populations including Appalachian and Hispanic women.

Colorectal cancer

Objective 1: By December 31, 2030 increase the percentage of adults aged 50-75 who receive a **colorectal cancer screening** based on the most recent Guidelines. (Baseline: 67.2%; Target: 80%)

***Hep B and C screening / detection / management**

Objective 1: Reduce the **incidence rate of liver cancer** from 7.2 (2017) to 6.5 (10% decrease) by 2025 (2022 data) and 5.76 (20% decrease) by 2030 (2027 data), for a total of 21.1% overall decrease.

Objective 2: Reduce the percentage of Ohioans diagnosed with **late stage liver cancer** from 40.3% (2017) to 36.8% in 2025 (2022 data) and 33.3% in 2030 (2027 data).

Objective 3: Increase the percent of **adults screened for Hepatitis C** from 0.87% in 2019 to 20% in 2025 and 40% in 2030.

***Vaccines for cancer prevention/HPV-associated cancers**

Objective 1: By December 31, 2030, increase the percentage of **adolescents** aged 13-17 years who are up to date with Human Papillomavirus (**HPV**) **vaccine**, especially among disparate populations residing in non-metropolitan (rural) areas of the state.

Objective 2: By December 31, 2030, increase the percentage of **young adults** aged 18-26 years who are up to date with Human Papillomavirus (**HPV**) **vaccine**.

Objective 3: By December 31, 2030, reduce the **disparity in HPV-associated cancer** incidence in Appalachian Ohio.

Lung cancer detection

Objective 1: Increase the rate of individuals who have had a **lung cancer screening** in eligible risk-adjusted, age-appropriate individuals from 5.2% to 15% (absolute) by 2025 and 25% by 2030.

Objective 2: Increase the percent of patients **diagnosed with localized lung cancer** from 26% to 35% by 2030.

Objective 3: Increase **overall survival** of lung cancer from 19% to 26.5% by 2030.

***Prostate cancer**

Objective 1: By December 31, 2030, reduce prostate cancer **mortality rate** from 19.5/100,000 (2017) to 17/100,000 for all Ohio men.

Objective 2: By December 31, 2030, increase the percentage of males 40 years of age and older who have had a discussion with their healthcare provider on the advantages and disadvantages of the **PSA test**.

PATIENT-CENTERED SERVICES

***Financial burden and barriers**

Objective 1: Increase the number of patients that report they've **discussed** their **health care costs with their provider** prior to receiving treatment by 10%.

Objective 2: Decrease total **out-of-pocket expenses** for cancer patients.

Objective 3: Increase **telehealth services** as part of standard Cancer Treatment plans.

^Objective 4: Increase the number of **patients that enroll in BCCP** prior to obtaining their screenings.

Palliative care and Hospice

^Objective 1: Increase the number of **health care professionals certified** in hospice and palliative care.

^Objective 2: Increase public and clinician **awareness** of difference between palliative care and hospice care in Ohio.

^Objective 3: All cancer patients in Ohio will be **screened for palliative care needs** at their initial visit, at appropriate intervals, and as clinically indicated.

Patient-centered services

Objective 1: By December 31, 2030, increase the percentage of adult cancer patients representing medically underserved populations who have **access to cancer support programs and community resources** by 5%. [Baseline: 0.]

^Objective 2: By December 31, 2030, increase the number of eligible adult cancer patients representing medically underserved populations who **enroll in clinical trials** by 5%.

CROSS-CUTTING TOPICS

***Geriatric oncology**

Objective 1: By December 31, 2030, conduct two statewide assessment amongst cancer specialists in Ohio to determine **rates of Geriatric Assessment**, or components thereof, (e.g. frailty and/or functional stratification) according to national guidelines.

Objective 2: Conduct two statewide assessments of **cancer screening rates and guideline consistency for older adults** with cancer [specifically cancer screening when > or equal to 65 yrs of age and/or diagnosed with malignancy] by December 31, 2025.

Objective 3: Increase older adult (> or equal to 65 years of age) enrollment in cancer **clinical trials** by 15% by 2030.

***Pediatric cancer**

Objective 1: By 2030, implement three or more programs to **better support pediatric cancer families** medically and emotionally, as they **transition** from diagnosis, to treatment, to survivorship/palliative care.

Objective 2: By 2030, implement three or more programs and/or processes that will **reduce the financial impact on families** of children, teens, and young adults with cancer in Ohio.

Objective 3: By 2030, hold two or more annual events to increase **awareness for pediatric cancer** with a greater emphasis on research, clinical trials, and effective treatment options.