

# Support Colorectal Cancer Early Detection SB 1028 (Huffman/Zaffirini) HB 3588 (Smithee)



## Early Detection Can Prevent Colorectal Cancer

Colorectal cancer is the third leading cause of cancer-related deaths in men and women, and the second most common cause of cancer deaths in the country when men and women are combined. In Texas, it is estimated that in 2021 there will be 11,280 new colorectal cancer cases diagnosed. The estimated annual number of colorectal cancer deaths in Texas is 4,030.<sup>i</sup>

Screening can prevent colorectal cancer through the detection and removal of precancerous growths. It can also detect cancer at an early stage, when treatment is usually less extensive and more successful. Regular adherence to screening with either stool testing or structural exams (e.g., colonoscopy) results in a similar reduction in premature colorectal cancer death over a lifetime.

Because of increased awareness and screening, the rate of people being diagnosed with colorectal cancer each year has been dropping since the mid-1980s. From 2013 to 2017, incidence rates dropped by about 1% each year, primarily in adults age 50 to 64. From 2012 to 2016, there has been a rising incidence of 2% each year in people younger than 50.<sup>i</sup>

Using this information, new guidelines from the American Cancer Society recommend that men and women at average risk for colorectal cancer be regularly screened beginning at 45 years of age, including a follow-up colonoscopy to a less invasive colorectal cancer screening that indicates a positive result. The follow-up colonoscopy should not be considered a “diagnostic” colonoscopy, but rather an integral part of the preventive screening process, which is not complete until the colonoscopy is performed, and therefore covered with no cost sharing for individuals. Encouraging greater use of less expensive, more patient preferred, and minimally invasive stool-based testing could result in higher screening rates and lower health care costs for both insurers and patients.

## Ensure Coverage for Follow-Up Colonoscopies Following a Positive Non-Invasive Stool-Based Test

Using the American Cancer Society’s updated guidelines, ACS CAN advocates for legislation to ensure the removal of co-pay requirements for a follow-up colonoscopy following a positive non-invasive CRC screening test and reducing the screening age for individuals over the age of 45.

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<sup>i</sup>American Cancer Society. Cancer Facts and Figures 2021.

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