

CRC screening before Medicare age could save millions in federal health-care dollars

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A screening program for colon cancer in patients starting ten years prior to Medicare eligibility, at age 55 instead of Medicare's 65, would save at least two dollars for every dollar spent, according to a new study presented at the American College of Gastroenterology's 73rd Annual Scientific Meeting in Orlando.

Source: American College of Gastroenterology

As people get older, their risk of developing polyps and colorectal cancer increases. Current guidelines recommend a screening colonoscopy for average risk individuals beginning at age 50. But for many uninsured Americans, a lack of health insurance coverage poses a barrier to screening. Medicare coverage for most Americans begins at age 65, creating a coverage gap.

In order to determine the effect of a lack of health coverage on screening and the cost effectiveness of screening uninsured patients, Dr. Jianjun Li and colleagues from Maimonides Medical Center in Brooklyn offered free colonoscopies to 248 consecutive patients (mean age 55) as part of a colorectal cancer screening program. Nearly 45 percent of patients had polyps. Five patients had early stage colon cancer, and 22 patients had polyps larger than 1 cm. These large polyps are felt to have a greater risk of harboring or developing into colorectal cancer than smaller polyps. The screening program cost a total of \$390,000.

The researchers concluded that had these patients not been screened, and the cancers and polyps allowed to progress undetected—assuming the cost of treatment and screening would be delayed until the Medicare eligibility age of 65—the estimated costs would be \$1,295,000.

"Our study highlights the cost effectiveness and the lifesaving potential of a federally funded screening program for the uninsured ten years before they are eligible for Medicare," said Dr. Tenner.

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