

IDENTIFYING INFORMATION		
Name:	Colorectal cancer screening	
Short/Other Names:	n/a	
BACKGROUND, INTERPRETATION AND BENCHMARKS		
Description:	The percentage of eligible patients in the zone or PCN who completed a colorectal cancer screening test.	
Rationale:	Providing physician with their colorectal cancer screening rates will encourage them to screen their eligible patients. Research has shown that patients who have regular stool test are more likely to survive colorectal cancer. Early detection may also mean less treatment and less time spent recovering.	
Interpretation:	A higher rate implies more eligible patients in a zone or PCN have been screened.	
Target/Benchmark:	No benchmarks have been identified.	
INDICATOR CALCULATION		
Calculation:	Screening rate =	
	(Number of eligible patients who completed colorectal cancer screening) Total number of eligible patients in zone or PCN	
	Type of Measure: Percentage	
	Adjustment Applied: None	
Denominator:	Description	
	The number of eligible patients in a zone or PCN.	
	Inclusion Criteria	
	Patients aged between 50 and 74 years.	
	For PCN-level data, patients assigned to the PCN by the HQCA algorithm. Finally signs.	
	Exclusions	
	■ None	



Numerator:

Description

The total number of asymptomatic patients screened for colorectal cancer.

The number of eligible patients is based on:

- 2 years of past lab data for fecal immunochemical test.
- 10 years of past claims data for colonoscopy.
- 5 years of past claims data for flex sigmoidoscopy.

Colorectal cancer screening identification: (Lab test codes or order test code or order test name)

- Fecal immunochemical test (FIT), lab test codes [Test Code or Order Test Code]:
 - o FIT (Fecal Immunochemical Test)
 - FIT1 (Fecal Immunochemical Test 1)
 - FIT2 (Fecal Immunochemical Test 2)
- Colonoscopy is identified by the procedure (billing) codes below:
 - o 01.22 (Other non-operative colonoscopy)
 - 01.22A (Other non-operative colonoscopy for screening high risk patients)
 - 01.22B (Other non-operative colonoscopy for screening moderate risk patients)
 - 01.22C (Other non-operative colonoscopy for screening average risk patients)
 - 01.16A (Small bowel capsule endoscopy)
 - o 01.16B (Balloon [single or double] enteroscopy, rectal route)
- Flex Sigmoidoscopy is identified by the procedure (billing) codes below:
 - o 01.24B (Flexible proctosigmoidoscopy)
 - 01.24BA (Flexible proctosigmoidoscopy for screening of patients considered to be of high risk for colon cancer due to family history)
 - 01.24BB (Flexible proctosigmoidoscopy for screening of patients considered to be of high risk for colon cancer)

Inclusion Criteria

- Patients aged between 50 and 74 years.
- Patients with identified colorectal cancer screening records.

Exclusions

Patients younger than 50 or older than 74.



DATA DETAILS		
Data Sources:	Alberta Health Physician claims Alberta Health Care Insurance Plan (AHCIP) Registry AHS Laboratory Data	
Available Data Year:	Type of Year: Fiscal year [starts April 1, ends March 31] Last Available Year: 2022/23	
Geographic Coverage:	The province of Alberta excluding the military and prisoners.	
Reporting Levels:	Zone, PCN	
QUALITY STATEMENT		
Limitations and Technical Notes:	PCN assignment is based on which physician a patient is assigned to by the HQCA algorithm.	
	 Not all physicians belong to a PCN; as a result not all patients are assigned to PCNs. 	
	 All calculations include only patients who are currently listed as 'Active' in the Alberta Health Care Insurance Plan (AHCIP) Registry database. This may lead to underestimation of the calculated measure above. 	
	 Each patient is counted once regardless of the number of tests performed in a given time period. 	
	 Only Alberta data is available. As such, any visits by Alberta patients to labs or facilities outside of the province are not included. 	