

Cancer Screening Among People with HIV



Background

How do cancers affect PWH?

Cancer has been associated with HIV since its discovery. As treatment has advanced, people with HIV (PWH) are living longer and the most common cancers among PWH have shifted to those that typically affect people without HIV. Cancer screening recommendations are often the same for PWH and people without HIV. Still, PWH are more likely to develop cancer and less likely to get screened, treated or survive than peers without HIV.

Access and uptake to cancer screening are a priority in addressing cancer among PWH in Michigan as early detection can increase treatment success. This merits an improvement of strategies to incorporate clinical guidance into clinical practice and efforts to make cancer screenings accessible for PWH.

To assess gaps in cancer-related services among PWH in Michigan, we examined rates of cancer screenings and diagnosis among PWH enrolled in Michigan Medicaid between 2018 and 2022* and [Medical Monitoring Project \(MMP\)](#) data.

Breast (Chest) Cancer Screening

Among females with HIV ages 50-64,

50%

had not received breast (chest) cancer screening at any point during the five-year period.*

Cervical Cancer Screening

MMP data shows between

70-78%

of female adults with HIV received cervical cancer screening within the prior three years.

Colorectal Cancer

Male and female adults with HIV were

4x & 9x

more likely, respectively, to receive a diagnosis of colorectal cancer than their peers.*

Lung Cancer

PWH had nearly a

2x

higher chance of receiving a lung cancer diagnosis than their peers.*

*Data resulted from:

1. A population-level match between HIV and Medicaid; and,
2. Identifying Medicaid claims indicative of breast (chest) cancer screening and lung and colon cancer diagnoses.

Snapshot

Cancer screening and diagnosis among PWH in Michigan.

Cancer screening should be a significant aspect of annual health check-ups in HIV clinical care. It is necessary for providers to ensure cancer screening is discussed and offered to each client as recommended by clinical guidance or more often for people with a higher likelihood of developing cancers. Providers can address gaps in screening by ensuring clients have access to health insurance, developing data system tracking and follow-up processes, implementing closed-loop referral practices, and ensuring annual delivery of information about cancers and screening is stigma-free and client-centered.

Close Gaps

How can providers respond?

Visit Michigan.gov/CaSpr for up-to-date breast (chest), cervical, colorectal and lung cancer screening guidance. Providers can refer clients to the Cancer Screening Project (CaSpr) services, which include free coordination and navigation services for the screening of colorectal, cervical, breast (chest) and lung cancers for PWH in Michigan.

CaSPr Programming

The Cancer Screening Project (CaSPr) offers free coordination and navigation services for the screening of colorectal, cervical, breast (chest) and lung cancers for people with HIV (PWH) across all 83 counties in Michigan. The information below summarizes October 2023 - September 2024 achievements.

Summary

In Michigan, cancers continue to affect PWH who are often less likely to get screened, treated or survive compared to people without HIV. Data on screening of these cancers show sizeable gaps in care among PWH in Michigan.

CaSPr navigation services achieved 100% success rate in completing cancer screenings when eligible people were referred, but services appear to be underutilized. CaSPr services help providers identify cancer-related community resources, ensure clinical and case management staff are knowledgeable in screening guidance and provide direct navigation services to clients for cancer screenings.

Ryan White HIV/AIDS Program providers can support access to cancer screening services among PWH by:

- Incorporating screening recommendations into clinical practice.
- Increasing referrals of clients who need preventive screenings to CaSPr.
- Requesting assistance from the CaSPr navigator to help identify cancer screening services in the community.
- Ensure staff and consumers have access to trustworthy information about cancer and HIV, including screening recommendations.

Coordination

Eighty nine calls were made to CaSPr to **coordinate** access to referrals and community resources or agencies.

Navigation

All 14 clients referred to CaSPr received each **screening requested by their physician**. Five of 31 (16%) Ryan White subrecipients referred clients.

Education

CaSPr delivered 28 lunch and learns about cancer screening and CaSPr services and provided education on cancers to more than 1,250 people at four Pride festivals.



Providers or PWH can access help finding screening resources in rural communities.

Questions like:

- *What is the schedule for the traveling mammogram bus?*
- *Is there a primary care provider (PCP) with experience screening people like me for cervical cancer?*
- *Can you help link screening resources with PCPs?*



Providers refer patients to CaSPr, which supports access to cancer screenings by leveraging a variety of resources and addressing barriers. The CaSPr navigator works with clients to schedule screenings or PCP appointments and address diverse barriers to screening access, such as transportation, language barriers, daycare needs and information gaps. CaSPr provides appointment reminders and maintains communication with the referring provider, care team, medical case manager and patient.



CaSPr attends Pride festivals and agency outreach events to provide information about cancer screening and CaSPr. The inflatable colon shown below is used to facilitate engagement and interactive education with the community on colon cancer.

For information about the inflatable colon for community events, please view our [flyer](#).



Contact the CaSPr navigator for questions about this program at 517-512-5041. Visit Michigan.gov/CaSPr for more information and to access the [patient referral form](#).