

# AN EMERGING CRISIS OF UNDIAGNOSED DISEASES AND DELAYED TREATMENT

*Preliminary analysis of 2020 Medicare data suggests alarming declines in routine screenings and chronic disease testing*

## Methodology

Braid Forbes Health Research analyzed Medicare Clinical Laboratory Fee Schedule (CLFS) utilization data for key laboratory tests, including those used for routine screenings, cancer, and chronic disease management. This preliminary analysis compares the volume of CLFS tests performed in the first three calendar quarters of 2020\* to the volume of tests performed in the first three calendar quarters of 2019.<sup>1</sup>

## Key Findings

- Clinical laboratory test utilization overall **fell by 18%** from 2019 to 2020, even when taking into account the large volume of COVID-19 testing conducted in 2020.
- Chemistry panels, critical tools often used for routine screenings, **fell by 22%**.
- Testing to detect and treat top chronic conditions among Medicare beneficiaries saw sharp declines in utilization, including key tests for cancer, cardiovascular disease, and diabetes.
- Left unchecked, many of these diseases will progress from manageable chronic conditions to life changing illnesses. This is particularly true for older Americans, 85 percent of whom already have at least one chronic health condition.<sup>2</sup>

*Analysis of 2019-2020 Test Volume for CMS Top Chronic Conditions<sup>3</sup>*



31%

drop in **CANCER** testing on average across key tests.



32%

drop in **CARDIOVASCULAR DISEASE** testing on average across key tests.



29%

drop in **DIABETES** testing on average across key tests.

## Disease-Specific Analysis of 2019-2020 Test Volume

Cancer testing **decreased by 31%** on average across key tests, including:

- EFGR test for non-small cell lung cancer: **47% decrease**
- BRCA test for breast and ovarian cancer: **35% decrease**
- Prostate specific antigen (PSA) test: **16% decrease**

Cardiovascular disease testing **decreased by 32%** on average across key tests, including:

- Lipid panel: **22% decrease**
- Cholesterol serum test: **46% decrease**
- Triglyceride test: **36% decrease**

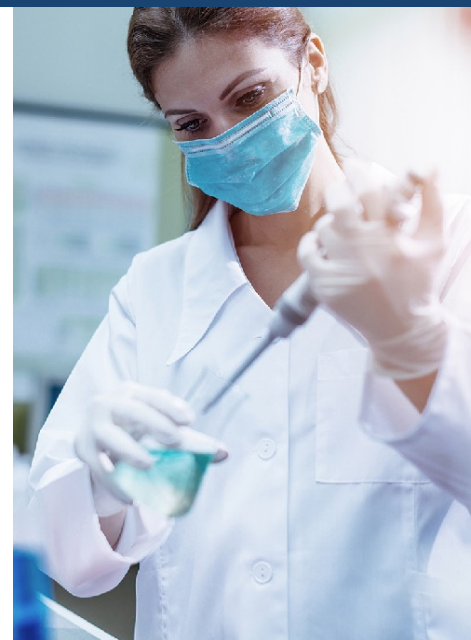
Diabetes testing **decreased by 29%** on average across key tests, including:

- A1c test: **20% decrease**
- Glucose test: **36% decrease**

Testing for additional conditions have also faced declines in test volume:

- Rheumatoid arthritis testing on average: **18% decrease**
- Chronic kidney disease testing on average: **31% decrease**
- Liver disease testing on average: **23% decrease**
- Drug testing on average: **21% decrease**

These alarming declines in test volume suggest that throughout the COVID-19 pandemic, seniors have faced delays in both routine screenings as well as testing for diagnosis, treatment and management of a variety of medical conditions. **Medical professionals, policymakers and advocates must work together to raise awareness of this downward trend and ensure seniors do not face additional obstacles to helping them better manage their health care.**



The National Cancer Institute has predicted almost **10,000 excess deaths over the next decade from breast and colorectal cancer alone** because of pandemic-related delays in diagnosis and treatment.

### Sources

1. CMS Published Clinical Lab Fee Schedule Rates 2019-2020, 2019 Q1, Q2 and Q3, 2020 Q1, Q2 and Q3 Outpatient 100% Standard Analytic Files (SAFs), 2019 Q1, Q2 and Q3, 2020 Q1, Q2 and Q3 Carrier 5% Standard Analytic Files (SAFs)
2. U.S. Department of Health and Human Services. (n.d.). *Supporting Older Patients with Chronic Conditions*. National Institute on Aging. <https://www.nia.nih.gov/health/supporting-older-patients-chronic-conditions>.
3. CMS Office of Enterprise Data and Analytics Chronic Conditions Public Use Data, 2018. <https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/chronic-conditions>
4. Sharpless, Norman E. "COVID-19 and Cancer." *Science*. American Association for the Advancement of Science, June 19, 2020. <https://science.sciencemag.org/content/368/6497/1290>.

\*Analysis limited to Q1-Q3 due to availability of data