

# **Comprehensive Cancer Alliance for Idaho**

## **Strategic Plan Objectives 2011-2015**

### Version History

December 8, 2011	Measures approved by CCAI Board of Directors.
January 4, 2012	Updates to summary measures of cancer burden in Idaho through 2009, US mortality data through 2008, Idaho mortality data through 2010, and Idaho incidence data through 2009; correction to baseline for Objective 10 - Reduce invasive uterine cervical cancer; updates to Objective 12 - Increase the proportion of cancer survivors who are living 5 years or longer after diagnosis.
July 13, 2012	Updates to US mortality data through 2009, SEER cancer incidence through 2009.
May 13, 2013	Recalculation of all cancer mortality baseline data, targets, and rankings using revised intercensal population estimates released from the National Center for Health Statistics in October 2012. Updates to SEER cancer incidence through 2010; US mortality through 2010; Idaho mortality data through 2011; and Idaho incidence data through 2010. Update of US data for Objective 27 - Reduce the proportion of adolescents in grades 9 through 12 who report using artificial sources of ultraviolet light for tanning.
September 12, 2013	Updates to US cancer incidence through 2010; recalculation of baseline data, targets, and rankings for all objectives using BRFSS data due to changes in BRFSS methodology beginning with the 2011 survey; updates to Objective 13 based on revised data; revision of Objectives 14 and 16 to be consistent with recommendations from the USPSTF and HP2020 measures; revision of Objective 22 to be consistent with a CDC BRFSS physical activity measure beginning with the 2011 survey.

# Comprehensive Cancer Alliance for Idaho

## Strategic Plan Objectives 2011-2015

### Vision

*“Every Idahoan deserves the opportunity for proper cancer prevention and detection; state-of-the-art cancer treatment; and the highest possible quality of life which we are committed to provide through a data-driven, coordinated, comprehensive cancer plan.”*

### Outcome Measures Used in Cancer Control

Cancer Control Component	Outcome Measures*
Primary prevention	Incidence, Mortality
Screening	Mortality, Localized stage percentage, Survival
Early clinical diagnosis	Survival, Localized stage percentage, Mortality
Treatment	Survival, Mortality
Rehabilitation	Quality of life
Palliative care	Quality of life

\* Outcome measures in decreasing order of utility for monitoring and evaluating components of cancer control.

Adapted from: Armstrong BK. The role of the cancer registry in cancer control. Cancer Causes and Control 1992;3:569-579.

**SUMMARY MEASURES OF CANCER BURDEN IN IDAHO - 2010**

<b>Primary Site</b>	<b>Incident Cases</b>	<b>Deaths</b>	<b>Median Age at Diagnosis</b>	<b>Median Age at Death</b>	<b>Estimated Prevalence Count</b>	<b>Total Number of YPLL Before Age 75</b>	<b>Average Number of YPLL per Death, Persons Aged Less than 75 Years</b>	<b>% Change Incidence Rate 2009 to 2010</b>
All Sites	7,140	2,532	66.0	72.0	54,336	18,183	12.3	-2.5%
Bladder	364	62	73.0	76.0	2,407	252	8.4	9.1%
Brain	89	79	60.0	60.5	546	1,192	18.3	-10.1%
Breast	999	189	63.0	68.0	11,109	1,774	13.9	-1.6%
Cervix	50	13	48.5	59.0	810	234	21.2	40.1%
Colorectal	551	212	68.0	73.0	4,435	1,491	12.3	-12.8%
Corpus Uteri	194	14	62.0	80.5	2,290	41	8.1	-6.7%
Esophagus	68	74	65.5	68.5	148	656	13.7	-0.3%
Hodgkin Lymphoma	40	5	40.0	65.0	728	46	15.2	1.3%
Kidney	207	69	64.0	70.0	1478	642	14.3	-16.3%
Larynx	37	17	65.0	68.0	344	118	9.8	-19.8%
Leukemia	262	116	67.0	77.0	1416	726	15.1	11.7%
Liver and Bile Duct	83	75	61.0	63.0	111	923	18.1	2.3%
Lung and Bronchus	808	609	71.0	73.0	1,492	3,203	8.8	0.4%
Melanoma of Skin	373	57	62.0	63.0	3,963	707	16.4	-8.4%
Myeloma	90	56	72.0	74.0	338	197	6.0	-14.0%
Non-Hodgkin Lymphoma	290	88	66.0	77.0	2,079	408	10.4	-3.7%
Oral Cavity and Pharynx	219	46	65.0	70.0	1,451	459	15.8	-3.0%
Ovary	98	50	65.0	72.5	748	394	14.6	6.3%
Pancreas	196	182	70.0	71.5	165	1,240	11.3	14.4%
Prostate	1,111	155	67.0	80.0	11,533	362	6.6	-7.2%
Stomach	90	34	68.5	73.0	260	187	9.4	33.2%
Testis	40	3	32.0	30.0	960	-	-	-16.5%
Thyroid	256	12	49.5	78.0	2,529	104	17.3	1.2%

Notes:

Incident cases include all invasive and bladder in situ cases newly diagnosed among Idaho residents in 2010.

Cancer prevalence is the number of people alive today who have been diagnosed with cancer. This includes individuals who were newly diagnosed, are in active treatment, have completed active treatment, and those living with progressive symptoms of their disease. Limited-duration prevalence was estimated from long-term incidence and survival rates from 1970 to 2010 but underestimates complete prevalence due to an unknown number of live cases diagnosed prior to 1970.

Years of potential life lost (YPLL) is a statistic used to measure the number of years of life lost in a population when persons in that population die prematurely (standard of 75 years of age used for this table).

Mortality-related statistics are suppressed for testis primary site due to small number of deaths.

## Comprehensive Cancer Alliance for Idaho Strategic Plan Objectives 2011-2015

### 1. Reduce the overall cancer death rate.

Target: 161.4 deaths per 100,000 population.

Idaho Baseline: 166.5 cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 1: Overall Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	166.5	166.9	159.0	158.6	156.6			161.4
Ranking*	8 <sup>th</sup>	11 <sup>th</sup>	9 <sup>th</sup>	8 <sup>th</sup>				
U.S. Rate	179.3	176.3	173.4	171.8				

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

### 2. Reduce the lung cancer death rate.

Target: 37.3 deaths per 100,000 population.

Idaho Baseline: 41.4 lung cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 2: Lung & Bronchus Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	41.4	41.9	41.4	38.6	37.4			37.3
Ranking*	8 <sup>th</sup>	8 <sup>th</sup>	11 <sup>th</sup>	8 <sup>th</sup>				
U.S. Rate	50.7	49.6	48.4	47.4				

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

### 3. Reduce the female breast cancer death rate.

Target: 20.7 deaths per 100,000 females.

Idaho Baseline: 21.6 female breast cancer deaths per 100,000 females occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 3: Female Breast Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	21.6	22.0	22.5	21.3	21.9			20.7
Ranking*	17 <sup>th</sup>	26 <sup>th</sup>	31 <sup>st</sup>	20 <sup>th</sup>				
U.S. Rate	23.0	22.6	22.2	21.9				

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

4. Reduce the death rate from cancer of the uterine cervix.

Target: 2.2 deaths per 100,000 females.

Idaho Baseline: 2.5 uterine cervix cancer deaths per 100,000 females occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 4: Uterine Cervix Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	2.5	2.7	2.0	1.6	1.9			2.2
Ranking*	31 <sup>st</sup>	31 <sup>st</sup>	14 <sup>th</sup>	6 <sup>th</sup>				
U.S. Rate	2.4	2.4	2.3	2.3				

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

5. Reduce the colorectal cancer death rate.

Target: 13.7 deaths per 100,000 population.

Idaho Baseline: 15.2 colorectal cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 5: Colorectal Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	15.2	14.3	13.5	13.3	13.8			13.7
Ranking*	8 <sup>th</sup>	7 <sup>th</sup>	7 <sup>th</sup>	4 <sup>th</sup>				
U.S. Rate	16.9	16.5	15.8	15.5				

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

6. Reduce the oropharyngeal cancer death rate.

Target: 2.3 deaths per 100,000 population.

Idaho Baseline: 2.3 oropharyngeal cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 6: Oropharyngeal Cancer Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	2.3	2.7	2.6	2.9	2.4			2.3
Ranking*	17 <sup>th</sup>	36 <sup>th</sup>	36 <sup>th</sup>	40 <sup>th</sup>				
U.S. Rate	2.5	2.5	2.4	2.5				

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

7. Reduce premature deaths from prostate cancer.

Target: 3.9 deaths per 100,000 males aged 0-74.

Idaho Baseline: 4.3 prostate cancer deaths per 100,000 males aged 0-74 occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 7: Prostate Cancer Death Rate, Ages 0-74								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	4.3	6.2	4.5	5.9	5.2			3.9
Ranking*	3 <sup>rd</sup>	30 <sup>th</sup>	6 <sup>th</sup>	27 <sup>th</sup>				
U.S. Rate	6.2	6.0	5.8	5.9				

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

8. Reduce the melanoma cancer death rate.

Target: 2.4 deaths per 100,000 population.

Idaho Baseline: 3.1 melanoma cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: National Vital Statistics System (NVSS), CDC, NCHS; Bureau of Vital Records and Health Statistics, IDHW.

Objective 8: Melanoma Death Rate								
Year of Death	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	3.1	3.2	3.6	3.6	3.6			2.4
Ranking*	41 <sup>st</sup>	44 <sup>th</sup>	47 <sup>th</sup>	49 <sup>th</sup>				
U.S. Rate	2.7	2.7	2.8	2.7				

\* #1 rank is best. Mortality rates shown may differ from official mortality statistics from the Bureau of Vital Records and Health Statistics due to differences in cutoff dates from the NVSS and methodology.

9. Reduce invasive colorectal cancer.

Target: 38.6 new cases per 100,000 population.

Idaho Baseline: 40.9 new cases of invasive colorectal cancer per 100,000 population were reported in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: modeling/projection; HP2020.

Objective source: HP2020

Data sources: National Program of Cancer Registries (NPCR), CDC; Surveillance, Epidemiology and End Results (SEER) Program, NIH, NCI; Cancer Data Registry of Idaho.

Objective 9: Colorectal Cancer Incidence								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	40.9	40.3	39.3	34.2				38.6
Ranking*	8 <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup>	4 <sup>th</sup>				
U.S. Rate	45.5	44.4	42.3	39.7				

\* #1 rank is best.

10. Reduce invasive uterine cervical cancer.

Target: 4.2 new cases per 100,000 females.

Idaho Baseline: 4.7 new cases of invasive uterine cancer per 100,000 females were reported in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: HP2020

Data sources: National Program of Cancer Registries (NPCR), CDC; Surveillance, Epidemiology and End Results (SEER) Program, NIH, NCI; Cancer Data Registry of Idaho.

Objective 10: Uterine Cervix Cancer Incidence								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	4.7	6.1	4.8	6.8				4.2
Ranking*	2 <sup>nd</sup>	11 <sup>th</sup>	2 <sup>nd</sup>	18 <sup>th</sup>				
U.S. Rate	7.9	7.8	7.9	7.4				

\* #1 rank is best.

11. Reduce late stage female breast cancer among women aged 40+.

Target: 87.8 new cases per 100,000 females aged 40+.

Idaho Baseline: 97.5 new cases of late-stage breast cancer per 100,000 females aged 40+ were reported in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: AHRQ/CCAI

Data sources: National Program of Cancer Registries (NPCR), CDC; Surveillance, Epidemiology and End Results (SEER) Program, NIH, NCI; Cancer Data Registry of Idaho.

Objective 11: Late Stage Female Breast Cancer Incidence								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	97.5	90.2	90.5	94.4				87.8
Ranking*	n/a	n/a	n/a	n/a				
SEER 17 Rate	97.1	96.0	94.7	91.0				

\* #1 rank is best.

12. Increase the proportion of cancer survivors who are living 5 years or longer after diagnosis.

Target: 72.9 percent.

Idaho Baseline: 69.4 percent of persons with cancer were living 5 years or longer after diagnosis in 2007.

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: Surveillance Epidemiology and End Results (SEER) Program, NIH, NC; Cancer Data Registry of Idaho.

Objective 12: 5-Year Relative Survival Proportion (Period Approach; Ederer II; Presumed Alive)								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	69.4%	69.8%	69.4%					72.9%
Ranking*	n/a	n/a	n/a					
SEER 17 Rate	66.3%	66.9%	67.5%					

\* #1 rank is best. Note that survival statistics are not adjusted for age of patient or case mix.

13. Increase the proportion of cancer patients who enroll in treatment clinical trials.

Target: At least 50% of pediatric patients and 5% of adult patients will enroll in treatment clinical trials.

Idaho Baseline: 21.7% of pediatric patients and 1.7% of adults patients diagnosed in 2007 had enrolled in treatment clinical trials.

Target setting method and source: projection; CCAI.

Objective source: CCAI

Data source: Cancer Data Registry of Idaho; Idaho hospitals with Commission on Cancer Approved Programs.

Objective 13: Treatment Clinical Trial Participation								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Total	1.9%	2.7%	3.3%	2.7%	2.1%			50% Peds 5% Adults
Ages 0-19	21.7%	9.4%	27.5%	29.6%	24.1%			
Ages 20+	1.7%	2.6%	3.1%	2.4%	1.9%			

14. Increase the proportion of women aged 21-65 who have had a Pap test to screen for cervical cancer within the prior three years.

Target: At least 84.5% of women aged 21-65 who have not had a hysterectomy will report having had a Pap test in the prior three years.

Idaho Baseline: 75.4% of women aged 21-65 who have not had a hysterectomy reported having a Pap test to screen for cervical cancer within the prior three years (2012).

Target setting method and source: achieve U.S. median screening rate for 2012; CCAI.

Objective source: USPSTF, HP2020.

Data source: Behavioral Risk Factor Surveillance System.

Objective 14: Cervical Cancer Screening Rate				
Year	2012 (Baseline)	2014	2016	Target
Idaho Rate	75.4%			84.5%
Ranking*	51 <sup>st</sup>			
U.S. Median Rate	84.5%			

\* #1 rank is best; states & DC.

15. Reduce late stage colorectal cancer among persons aged 50+.

Target: 63.7 new cases per 100,000 persons aged 50+.

Idaho Baseline: 70.8 new cases of late-stage colorectal cancer per 100,000 persons aged 50+ were reported in 2007 (age adjusted to the year 2000 standard population).

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: AHRQ/CCAI

Data sources: National Program of Cancer Registries (NPCR), CDC; Surveillance, Epidemiology and End Results (SEER) Program, NIH, NCI; Cancer Data Registry of Idaho.

Objective 15: Late Stage Colorectal Cancer Incidence								
Year of Diagnosis	2007 (Baseline)	2008	2009	2010	2011	2012	2013	Target
Idaho Rate	70.8	71.2	70.5	57.7				63.7
Ranking*	n/a	n/a	n/a	n/a				
SEER 17 Rate	80.2	78.4	74.7	70.6				

\* #1 rank is best.



16. Increase the proportion of adult Idahoans who receive colorectal cancer screening based on the most recent guidelines.

Target: At least 65.1% of Idahoans aged 50-75 will report receiving a blood stool test in the past year, sigmoidoscopy in the past 5 years and blood stool test in the past 3 years, or a colonoscopy in the past 10 years.

Idaho Baseline: 60.5% of Idahoans aged 50-75 reported receiving a colorectal cancer screening based on the most recent guidelines, which include a blood stool test in the past year, sigmoidoscopy in the past 5 years and blood stool test in the past 3 years, or a colonoscopy in the past 10 years (2012).

Target setting method and source: achieve U.S. median screening rate for 2012; CCAI.

Objective source: USPSTF, HP2020.

Data source: Behavioral Risk Factor Surveillance System.

Objective 16: Colorectal Cancer Screening Rate, Ages 50-75				
Year	2012 (Baseline)	2014	2016	Target
Idaho Rate	60.5%			65.1%
Ranking*	38 <sup>th</sup>			
U.S. Median Rate	65.1%			

\* #1 rank is best; states & DC.

17A. Increase the proportion of women aged 40+ who have had a mammogram to screen for breast cancer within the prior two years.

Target: At least 74.0% of women aged 40+ will report having had a mammogram in the prior two years.

Idaho Baseline: 64.6% of women aged 40+ reported having a mammogram to screen for breast cancer within the prior two years (2012).

Target setting method and source: achieve U.S. median screening rate for 2012; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 17A: Breast Cancer Screening Rate – Ages 40+				
Year	2012 (Baseline)	2014	2016	Target
Idaho Rate	64.6%			74.0%
Ranking*	50 <sup>th</sup>			
U.S. Median Rate	74.0%			

\* #1 rank is best; states & DC.

17B. Increase the proportion of women aged 50-74 who have had a mammogram to screen for breast cancer within the prior two years.

Target: At least 78.4% of women aged 50-74 will report having had a mammogram in the prior two years.

Idaho Baseline: 69.4% of women aged 50-74 reported having a mammogram to screen for breast cancer within the prior two years (2012).

Target setting method and source: achieve U.S. median screening rate for 2012; CCAI.

Objective source: USPSTF; HP2020

Data source: Behavioral Risk Factor Surveillance System.

Objective 17B: Breast Cancer Screening Rate – Ages 50-74				
Year	2012 (Baseline)	2014	2016	Target
Idaho Rate	69.4%			78.4%
Ranking*	50 <sup>th</sup>			
U.S. Median Rate	78.4%			

\* #1 rank is best; states & DC.

18. Decrease the proportion of adults aged 18+ who are current smokers.

Target: 12.0%.

Idaho Baseline: 17.2% of adults aged 18+ reported being current smokers in 2011.

Target setting method: retain Healthy People 2010 target; HP2020.

Objective source: HP2020.

Data source: Behavioral Risk Factor Surveillance System.

Objective 18: Smoking Rate							
Year	2011 (Baseline)	2012	2013	2014	2015	2016	Target
Idaho Rate	17.2%	16.4%					12.0%
Ranking*	6 <sup>th</sup>	7 <sup>th</sup>					
U.S. Median Rate	21.2%	19.6%					

\* #1 rank is best; states & DC.

19. Reduce tobacco use by adolescents.

Target: 13.4%.

Idaho Baseline: 21.5% of adolescents in grades 9 through 12 used cigarettes, chewing tobacco, snuff, or cigars in the past 30 days in 2009.

Target setting method: retain CCAI Strategic Plan 2006-2010 target; CCAI.

Objective source: CCAI.

Data source: Youth Risk Behavior Surveillance System.

Objective 19: Adolescent Tobacco Use					
Year	2009 (Baseline)	2011	2013	2015	Target
Idaho Rate	21.5%	19.7%			13.4%
Ranking*	n/a	n/a			
U.S. Rate	26.0%	23.4%			

\* #1 rank is best.

20. Increase the proportion of adults aged 18-64 who have any kind of health care coverage.

Target: 78.7%.

Idaho Baseline: 73.5% of adults aged 18-64 reported having any kind of health care coverage in 2011.

Target setting method and source: achieve U.S. median rate for 2011; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 20: Health Care Coverage							
Year	2011 (Baseline)	2012	2013	2014	2015	2016	Target
Idaho Rate	73.5%	76.6%					78.7%
Ranking*	43 <sup>rd</sup>	36 <sup>th</sup>					
U.S. Median Rate	78.7%	79.6%					

\* #1 rank is best; states & DC.

21. Increase the proportion of adults who are neither overweight nor obese.

Target: 41.5%.

Idaho Baseline: 37.7% of adults aged 18+ were neither overweight nor obese based on body mass index (BMI) in 2011.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 21: Weight Classification by Body Mass Index (BMI)							
Year	2011 (Baseline)	2012	2013	2014	2015	2016	Target
Idaho Rate	37.7%	37.4%					41.5%
Ranking*	19 <sup>th</sup>	18 <sup>th</sup>					
U.S. Median Rate	36.5%	36.6%					

\* #1 rank is best; states & DC.

22. Increase the proportion of adults who participate in enough aerobic and muscle strengthening exercises to meet guidelines.

Target: 24.6%.

Idaho Baseline: 22.4% of adults aged 18+ participated in enough aerobic and muscle strengthening exercises to meet guidelines in 2011.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 22: Physical Activity				
Year	2011 (Baseline)	2013	2015	Target
Idaho Rate	22.4%			24.6%
Ranking*	12 <sup>th</sup>			
U.S. Median Rate	21.0%			

\* #1 rank is best; states & DC.

23. Decrease the proportion of adult males who use smokeless tobacco.

Target: 6.8%.

Idaho Baseline: 8.8% of adult males were current users of smokeless tobacco in 2011.

Target setting method and source: 2 percentage point improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 23: Smokeless Tobacco Use							
Year	2011 (Baseline)	2012	2013	2014	2015	2016	Target
Idaho Rate	8.8%	9.0%					6.8%
Ranking*	33 <sup>rd</sup>	35 <sup>th</sup>					
U.S. Median Rate	7.8%	7.6%					

\* #1 rank is best; states & DC.

24. Increase the physical health-related quality of life of cancer survivors.

Target: 22.9%.

Idaho Baseline: 25.4% of cancer survivors (excluding skin cancer) reported poor physical health in 14 or more of the previous 30 days in 2011.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 24: Physical Health-Related Quality of Life of Cancer Survivors							
Year	2011 (Baseline)	2012	2013	2014	2015	2016	Target
Idaho Rate	25.4%	27.8%					22.9%
Ranking*	24 <sup>th</sup>	37 <sup>th</sup>					
U.S. Median Rate	25.6%	25.5%					

\* #1 rank is best; states & DC.

25. Increase the mental health-related quality of life of cancer survivors.

Target: 15.0%.

Idaho Baseline: 17.0% of cancer survivors (excluding skin cancer) reported poor mental health in 14 or more of the previous 30 days in 2011.

Target setting method and source: 2 percentage point improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 25: Mental Health-Related Quality of Life of Cancer Survivors							
Year	2011 (Baseline)	2012	2013	2014	2015	2016	Target
Idaho Rate	17.0%	16.9%					15.0%
Ranking*	36 <sup>th</sup>	31 <sup>st</sup>					
U.S. Median Rate	15.8%	15.9%					

\* #1 rank is best; states & DC.

26. Increase the proportion of homes that have been tested for radon.

Target: 20.0%.

Idaho Baseline: 16.7% of households in Idaho have ever been tested for radon (2012).

Target setting method and source: 20 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 26: Radon Testing				
Year	2012 (Baseline)	2014	2016	Target
Idaho Rate	16.7%			20.0%

\* Denominator includes those who have never heard of radon.

27. Reduce the proportion of adolescents in grades 9 through 12 who report using artificial sources of ultraviolet light for tanning.

Target: 14.0 percent.

Idaho Baseline: 19.2 percent of adolescents in grades 9 through 12 reported using artificial sources of ultraviolet light for tanning in 2009.

Target setting method and source: 10 percent improvement from national baseline; HP2020.

Objective source: HP2020

Data source: Youth Risk Behavior Surveillance Survey (YRBSS), CDC.

Objective 27: Artificial Tanning Appliance Use - Adolescents							
Year	2009 (Baseline)	2011	2012	2013	2014	2015	Target
Idaho Rate	19.2%	14.0%					14.0%
Ranking*	n/a	n/a					
U.S. Rate	15.6%	13.3%					

\* #1 rank is best.

28. Reduce the proportion of adults aged 18 years and older who report sunburn.

Target: 28.3%.

Idaho Baseline: 30.3% of adult Idahoans reported having a red or painful sunburn that lasted a day or more in the past 12 months in 2012.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 28: Sunburn - Adults					
Year	2012 (Baseline)	2013	2014	2015	Target
Idaho Rate	30.3%				28.3%
Ranking*	n/a				
U.S. Median Rate	n/a				

\* #1 rank is best.

29. Reduce the proportion of adults aged 18 and older who report using artificial sources of ultraviolet light for tanning.

Target: 4.6%.

Idaho Baseline: 5.1% of adult Idahoans used artificial sources of ultraviolet light for tanning in the past 12 months in 2011.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 29: Artificial Tanning Appliance Use - Adults				
Year	2011 (Baseline)	2014	2016	Target
Idaho Rate	5.1%			4.6%
Ranking*	n/a			
U.S. Median Rate	n/a			

\* #1 rank is best.

30. Increase the proportion of cancer patients who receive hospice care at the end of life.

Target: 89.2%.

Idaho Baseline: 81.1% of Medicare beneficiaries who had cancer, received care in a hospital, home care, skilled nursing facility or hospice, and died, died under hospice care, 2009.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Hospice Analytics.

Objective 30: Hospice Utilization							
Year	2009 (Baseline)	2010	2011	2012	2013	2014	Target
Idaho Rate	81.1%	83.1%	85.7%				89.2%
Ranking*	12 <sup>th</sup>	15 <sup>th</sup>	13 <sup>th</sup>				
U.S. Rate	77.2%	80.0%	81.2%				

\* #1 rank is best.

31. Increase the proportion of men aged 50+ who have ever talked to a health professional about the advantages and disadvantages of the Prostate Specific Antigen (PSA) test.

Target: At least 31.2% of men aged 50+ will report ever talking to a health professional about the advantages and disadvantages of the Prostate Specific Antigen (PSA) test.

Idaho Baseline: In 2012, 28.4% of men aged 50+ reported ever talking to a health professional about the advantages and disadvantages of the Prostate Specific Antigen (PSA) test.

Target setting method and source: 10 percent improvement from Idaho baseline; CCAI.

Objective source: CCAI

Data source: Behavioral Risk Factor Surveillance System.

Objective 31: PSA Test Informed Decision Making				
Year	2012 (Baseline)	2014	2016	Target
Idaho Rate	28.4%			31.2%
Ranking*	34 <sup>th</sup>			
U.S. Median Rate	29.8%			

\* #1 rank is best; states & DC.

32. (Developmental) Increase quality of life among cancer survivors.

Potential data source: Statistics from hospitals with Commission on Cancer Approved Programs.

33. (Developmental) Increase utilization of palliative care among cancer patients.

Potential data source: Statistics from hospitals with Commission on Cancer Approved Programs.