	ine Cancer Plan 2023 ormance Measures Progres	Baseline	Current	U.S. Compare	Progress	Target	Data Source	
iΟA	L 1: PREVENTION – Reduce Ca	ancer Risk Thro	ough Evidend	e-Based Stra	itegies			
oba	cco Objectives							
	Reduce the percentage of Maine youth that smoke cigarettes:	A. Middle school students	<b>1.5%</b> (1.2-1.7) 2019	<b>1.4%</b> (1.2-1.6) 2021	N/A	•	1.4%	MIYHS
1.1		B. High school students	<b>7.1%</b> (6.6-7.5) 2019	<b>5.5%</b> (4.9-6.1) 2021	N/A		6.4%	
	Reduce the percentage of Maine youth that smoked cigarettes and/or cigars and/or used chewing tobacco, snuff, dip, dissolvable tobacco product or an electronic vaping product on one or more of the past 30 days:	A. Middle school students	<b>7.6%</b> (6.9-8.3) 2019	<b>5.7%</b> (4.8-6.5) 2021	N/A		6.8%	MIYHS
1.2		B. High school students	<b>29.6%</b> (28.4-30.8) 2019	<b>18.6%</b> (17.5-19.8) 2021	N/A		26.6%	
	Reduce the percentage of Maine youth that are exposed to environmental tobacco smoke:	A. Middle school students	<b>22.1%</b> (20.8-23.3) 2019	<b>17.8%</b> (16.5-19.0) 2021	N/A		19.9%	
1.3		B. High school students	<b>27.0%</b> (25.4-28.6) 2019	<b>19.6%</b> (18.3-21.0) 2021	N/A		24.3%	MIYHS
1.4	Reduce the percentage of Maine adults that smoke cigarettes.		<b>17.6%</b> (16.4-18.8) 2019	<b>15.6%</b> (14.6-16.6) 2021	<b>13.4%</b> (13.2-13.7) 2021	•	15.8%	BRFSS
1.5	Reduce the percentage of Maine adults that report currently using any tobacco products (cigarettes, smokeless tobacco, e-cigarettes, or other tobacco products).		<b>23.5%</b> (21.2-25.8) 2015	<b>24.7%</b> (22.6-26.7) 2019	N/A	•	21.2%	BRFSS
1.6	Reduce the percentage of Maine adults that indicate that someone (including themselves) had smoked cigarettes, cigars or pipes anywhere inside their home in the past 30 days.		<b>8.5%</b> (7.2-9.8 ) 2017	<b>9.6%</b> (8.3-10.9) 2019	N/A	•	7.7%	BRFSS

Ninety-five percent confidence intervals are provided for most measures. If the 95 percent confidence intervals for two estimates overlapped, they were considered similar. If the confidence intervals did not overlap, the estimates were considered to be significantly different.

# Performance Measures Table DefinitionsBaseline – established using the most recent data availableMIYHS – Maine Integrated Youth Health SurveyDuring development of the planMRP – Maine Radon ProgramBRFSS – Behavioral Risk Factor Surveillance SystemNSDUH – National Survey on Drug Use and HealthCAPC Survey – Center to Advance Palliative CareSEOW – State Epidemiological Outcomes WorkgroupImmPact – Maine Immunization Information SystemUSPSTF – U.S. Preventive Services Task Force



	ine Cancer Plan 202 formance Measures Progre	Baseline	Current	U.S. Compare	Progress	Target	Data Source	
GOA	OAL 1: PREVENTION – Reduce Cancer Risk Th			nce-Based S	trategies co	ntinued		
Obes	ity Objectives							
	Increase healthy eating and physic	al activity among	Maine youth.					
		1. Grade 5-6 students	<b>46.6%</b> (44.5-48.6) 2019	<b>42.7%</b> (39.6-45.7) 2021	N/A	•	51.3%	
	A. Youth who consume 100% fruit juice, fruits, and/or vegetables five or more times a day:	2. Middle school students	<b>20.9%</b> (19.9-21.8) 2019	<b>18.1</b> % (17.0-19.2) 2021	N/A	•	23.0%	
1.7		3. High school students	<b>15.2%</b> (14.3-16.0) 2019	<b>13.6%</b> (12.8-14.5) 2021	N/A	•	16.7%	MIYHS
	B. Youth who are physically active	1. Middle school students	<b>25.5%</b> (24.6-26.3) 2019	<b>31.5%</b> (30.1-32.9) 2021	N/A		28.1%	
	for at least one hour per day:	2. High school students	<b>20.9%</b> (20.1-21.7) 2019	<b>25.2%</b> (24.1-26.3) 2021	N/A		23.0%	
	Increase healthy eating and physic	al activity among	Maine adults.					
	A. Adults who consume fruits or vegetables one or more times per day:	1. Fruits	<b>63.9%</b> (62.0-65.8) 2019	<b>65.0%</b> (63.7-66.3) 2021	<b>60.2%</b> (59.8-60.5) 2021	•	70.3%	
1.8		2. Vegetables	<b>87.1%</b> (85.7-88.5) 2019	<b>86.9%</b> (85.9-87.9) 2021	<b>79.3%</b> (79.0-79.6) 2021	•	95.8%	BRFSS
	B. Adults who participate in enough physical activity to meet guidelines.		<b>20.1%</b> (18.7-21.5) 2017	<b>20.6%</b> (18.9-22.2) 2019	<b>22.8%</b> (22.5-23.1) 2019	•	22.7%	
Alcoł	nol Objectives		1	1	1	1	1	
1.9	Decrease past 30-day alcohol use in high school students.		<b>22.9%</b> (21.8-24.0) 2019	<b>19.0%</b> (17.8-20.2) 2021	N/A		20.6%	MIYHS
1.10	Decrease past 30-day alcohol use b year-olds.	oy 18-25	<b>63.4%</b> (59.2-67.4) 2017-2018	<b>60.1%</b> (55.8-64.2) 2018-2019	<b>54.7</b> (53.9-55.5) 2018-2019	•	57.0%	SEOW NSDUH
Rado	n and Arsenic Objectives							
	Increase radon testing in:	25.20/	20.20/		[			
1.11	A. Owner-occupied structures.		<b>35.3%</b> (33.9-36.8) 2015-2016	<b>30.3%</b> (28.3-32.2) 2019	N/A	•	38.8%	BRFSS
	B. Non-seasonal residential rental properties.		<b>32.5%</b> (29.5-35.4) 2015-2016		onger asked or ed data not ava		35.8%	
1.12	Increase the number of household radon mitigation system when the radon test result.	<b>2,281</b> 2019	<b>2,681</b> 2021	N/A		2,510	MRP	
1.13	Increase the proportion of private arsenic.	wells tested for	<b>55.5%</b> (52.8-58.3) 2017	<b>52.0%</b> (49.1-54.8) 2019	N/A	•	65.0%	BRFSS

	ne Cancer Plan 2021 rmance Measures Progress		Baseline	Current	U.S. Compare	Progress	Target	Data Source
	1: PREVENTION – Reduce Can		ugh Evidence	e-Based Strat	egies contin	ued		
IPV O	bjective							
1.14	Increase the completion rate of HPN among male and female 13-year-old		<b>44.8%</b> December 2019	<b>35.7%</b> December 2021	N/A	•	49.3%	ImmPac
Jltravi	olet Radiation Objectives			-	-			-
		A. Grade 5 & 6	<b>48.5%</b> (45.4-51.7) 2019	<b>37.8%</b> (35.6-40.0) 2021	N/A	•	53.4%	
1.15	Increase the proportion of youth that use a SPF of 15 or higher when outside for more than one hour on a sunny day:		<b>32.2%</b> (30.0-34.4) 2019	<b>24.6%</b> (22.4-26.8) 2021	N/A	•	35.5%	MIYHS
	a sunny uay.	C. High school students	<b>23.6%</b> (22.0-25.1) 2019	<b>15.8%</b> (14.6-17.0) 2021	N/A	•	26.0%	
1.16	Reduce the proportion of youth who use indoor tanning devices:	A. Middle school students	<b>4.0%</b> (3.3-4.7) 2019	<b>2.5%</b> (1.9-3.1) 2021	N/A		2.0%	MIYHS
1.16		B. High school students	<b>8.1%</b> (7.1-9.1) 2019	<b>4.7%</b> (4.0-5.3) 2021	N/A		4.1%	
	2: SCREENING - Increase evide	ence-based sc	reening for a	all Mainers				
breast	Screening Objectives	iomon agos	80.9%	82.6%	78.2%			
2.1	Increase the percentage of Maine women ages 50-74 who had a mammogram in the past two years.		(78.6-82.9) 2018	(80.6-84.6) 2020	(77.5-78.9) 2020	•	81.5%	BRFSS
2.2	Reduce the rate of new cases of female breast cancer diagnosed as late stage.		<b>38.9</b> per 100,000 (36.4-41.5) 2016-2018	<b>39.2</b> per 100,000 (36.8-41.8) 2017-2019	<b>41.1</b> per 100,000 (40.9-41.2) 2017-2019	•	<b>35.0</b> per 100,000	Maine Cancer Registry
ervica	al Screening Objectives							
2.3	Maintain the percentage of Maine women ages 21-65 years old who had a Pap test within the past 3 years.		<b>81.9%</b> (79.5-84.4) 2018	<b>80.3%</b> (77.9-82.7) 2020	<b>78.0%</b> (77.3-78.6) 2020	•	81.9%	BRFSS
2.4	Rate of new cases of cervical cancer diagnosed as late stage is lower than (or does not exceed) current rate.		<b>2.3</b> per 100,000 (1.7-3.0) 2016-2018	<b>2.4</b> per 100,000 (1.7-3.1) 2017-2019	<b>3.5</b> per 100,000 (3.5-3.6) 2017-2019	•	<b>2.3</b> per 100,000	Maine Cancer Registry
olore	ctal Screening Objectives							
2.5	Increase colorectal cancer screening among eligible adults based on current U.S. Preventive Services Task Force guidelines (including stool-based test, colonoscopy, sigmoidoscopy, or CT colonography). Note: USPSTF recommended screening test options increased between 2018 and 2020.		<b>75.8%</b> (74.2-77.5) 2018	<b>81.2%</b> (79.7-82.7) 2020	<b>71.8%</b> (71.2-72.4) 2020		83.4%	BRFSS
2.6	Reduce the rate of new cases of colorectal cancer diagnosed as late stage.		<b>20.4</b> per 100,000 (19.1-21.6) 2016-2018	<b>20.8</b> per 100,000 (19.6-22.1) 2017-2019	<b>21.9</b> per 100,000 (21.8-21.9) 2017-2019	•	<b>18.4</b> per 100,000	Maine Cancer Registry

	ne Cancer Plan 2021- rmance Measures Progress	Baseline	Current	U.S. Compare	Progress	Target	Data Source	
GOAL	2: SCREENING-Increase evide	nce-based scre	ening for all	Mainers con	tinued			
Lung So	creening Objectives							
2.7	Increase lung cancer screening among eligible adults based on current U.S. Preventive Services Task Force guidelines.		<b>11.8%</b> (7.7-15.9) 2017-2018	<b>17.6%</b> (14.8-20.5) 2019-2020	N/A	•	25.0%	BRFSS
2.8	Increase the rate of shared decision making among adults who have received low dose CT screening.		<b>19.2%</b> (15.3-23.1) 2019	<b>24.5%</b> (19.8-29.4) 2021	N/A	•	32.0%	BRFSS
2.9	Reduce the rate of new cases of late stage lung cancer.		<b>48.4</b> per 100,000 (46.6-50.2) 2016-2018	<b>46.6</b> per 100,000 (44.8-48.3) 2017-2019	<b>35.6</b> per 100,000 (35.5-35.7) 2017-2019		<b>43.6</b> per 100,000	Maine Cancer Registry
2.10	Reduce the proportion of late stage lung cancer.		<b>68.2%</b> (66.8-69.6) 2016-2018	<b>67.3%</b> (65.9-68.7) 2017-2019	<b>65.0%</b> (64.8-65.1) 2017-2019		61.4%	Maine Cancer Registry
Prostat	te Screening Objectives							
	Increase evidence-based prostate specific antigen (PSA) screening: (Screening rates by age categories are determined by the USPSTF.)	A. Among men aged 40 to 54	<b>11.3%</b> (8.6-13.9) 2016	<b>9.8%</b> (6.2-13.5) 2020	N/A	•	**	
2.11		B. Among men aged 55-69	<b>37.3%</b> (33.9-40.8) 2016	<b>32.1%</b> (28.6-35.6) 2020	N/A	•	**	BRFSS
		C. Among men over 70	<b>42.2%</b> (37.9-46.5) 2016	<b>40.3%</b> (36.5-44.3) 2020	N/A	•	**	
2.12	Reduce the rate of new cases of late stage prostate cancer.		<b>23.9</b> per 100,000 (22.2-25.9) 2016-2018	<b>25.8</b> per 100,000 (24.0-27.7) 2017-2019	<b>23.7</b> per 100,000 (23.6-23.8) 2017-2019	•	<b>21.5</b> per 100,000	Maine Cancer Registry
GOAL	3: TREATMENT - Increase time	ely, high-qualit	ty, and evide	nce-based ca	ncer treatm	ent for all N	lainers	
3.1	Establish a baseline and monitor the number of patients treated at Commission on Cancer accredited hospitals in Maine.		<b>83.3%</b> (85.0-86.4) 2019	<b>85.7%</b> (82.5-84.1) 2020	N/A		**	Maine Cancer Registry
3.2	Increase the percentage of Mainers that participate in clinical trials as part of cancer treatment.		<b>7.6%</b> (5.3-9.9) 2011-2012	<b>5.1%</b> (2.7-7.4) 2020	N/A	+	**	BRFSS

\*\* Metric is for monitoring purposes only and no target is set.

 $\ensuremath{^{+}}$  Use caution when comparing data due to large gap in data collection years.

	ne Cancer Plan 202 rmance Measures Progres	Baseline	Current	U.S. Compare	Progress	Target	Data Source		
ioal	4: SURVIVORSHIP - Improve	the quality of	life for canc	er survivors	in Maine				
4.1	Increase the percentage of Maine cancer survivors who receive a holistic/comprehensive survivorship care plan which includes a treatment summary, surveillance, recommendations for health promotion, and risk reduction.		<b>37.5%</b> (32.1-43.0) 2011	<b>36.2%</b> (30.6-41.9) 2020	N/A	+	TBD		
	Improve the following health outcomes for Maine cancer survivors:								
	A. Reduce the percentage of survivors using tobacco.		<b>15.1%</b> (12.5-17.7) 2018	<b>13.0%</b> (10.5-15.5) 2021	<b>12.0%</b> (11.5-12.5) 2021	•	13.6%		
	B. Increase the percentage of survivors who consume:	1. Fruits one or more times per day	<b>69.5%</b> (66.0-73.1) 2017	<b>68.9%</b> (66.2-71.6) 2021	<b>63.2%</b> (62.3-64.0) 2021	•	76.5%		
4.2		2. Vegetables one or more times per day	<b>88.4%</b> (86.0-90.9) 2017	<b>86.9%</b> (84.8-89.0) 2021	<b>82.0%</b> (81.3-82.8) 2021	•	97.2%	BRFSS	
	C. Increase the percentage of survivors who engage in physical activity.		<b>20.8%</b> (18.0-23.7) 2017	<b>19.3%</b> (16.8-21.9) 2019	<b>23.2%</b> (22.5-23.8) 2019	•	22.9%		
	D. Reduce the percentage of survivors with poor mental health days (past month >13 days).		<b>15.0%</b> (12.4-17.6) 2018	<b>12.8%</b> (10.5-15.0) 2021	<b>14.5%</b> (13.9-15.1) 2021	•	13.5%		
	E. Reduce the percentage of survivors who have poor physical health days (past month >13 days).		<b>23.8%</b> (20.8-27.1) 2018	<b>19.7%</b> (17.1-22.2) 2021	<b>19.8%</b> (19.1-20.5) 2021	•	21.5%		
	5: PALLIATIVE CARE - Ensure r diagnosis and treatment	e all patients ha	ave comprel	nensive, high	-quality pall	iative care	througho	ut their	
5.1	Increase utilization of palliative care services in Maine.		76.9All New England states have an A gradeB Gradeaccept Maine.				**	<u>CAPC</u> <u>Survey</u>	
OAL	6: END-OF-LIFE - Ensure timely, high quality end-of-life support for cancer patients								
6.1	Increase awareness/utilization of care in Maine.	No way to measure how many people in Maine are utilizing the www.medicare.gov site. In many rural areas there is not a choice. Will need to revise metric when the plan is updated.							

\*\*Metric is for monitoring purposes only and no target is set.

 $\ensuremath{^+}$  Use caution when comparing data due to large gap in data collection years.





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