

According to the National Cancer Institute's Office of Cancer Survivorship, as of January 2022 there are 18.1 million cancer survivors in the United States, and that number is expected to increase to 22.5 million by 2032 and 26 million by 2040. *National Cancer Institute (NCI)*

By warding off, prevention or reducing health problems or lowering their incidence among employees, organizations hope to save on long-term health costs. By offering employees the means and the educational tools to take control of their wellness, employers promote a healthier, more productive work environment.² *Society for Human Resource Management (SHRM)*

The leading causes of death among adults are heart disease, cancer, COVID-19, chronic lower respiratory disease (including COPD-chronic obstructive pulmonary disease), stroke and unintentional injury, and diabetes.³

Some of the nation's leading health conditions such as: heart disease, stroke and lung cancer are caused by or made worse by exposure secondhand smoke in adults. Employees spend approximately 1/3 of their life in the work environment.⁴ *Centers for Disease Control and Prevention (CDC)*

Smoking, radon, and secondhand smoke can individually put someone at risk for lung cancer. The combined health effects of radon and tobacco exposure are synergistic, so reducing either of the exposures substantially reduces lung cancer risk.⁵ *United States Environmental Protection Agency (EPA)*

Employers who offer wellness initiative have achieved excellent returns on their investment (ROI). Programs that follow best practice guidelines return \$2 to \$3 for each dollar invested. ** *United States Chamber of Commerce**

People who are physically and mentally fit have the capacity and ability to give more to their families, communities and, yes, to their employers. *Forbes* (2022)



The leading causes of death among adults are heart disease, cancer, COVID-19, chronic lower respiratory disease (including COPD-chronic obstructive pulmonary disease), stroke and unintentional injury, and diabetes.



Medical Conditions in the Nation

Regardless of industry type, business size or geographic location, employers and employees may be living with or impacted by health conditions. Approximately one in three American adults have multiple chronic conditions (MCCs), which are medical conditions that last one year or more and require ongoing medical attention.8 Moreover, the number of adult cancer survivors with multiple chronic conditions (MCC) or comorbidities has increased in the past 2 decades, especially among cancer survivors aged 18-44 years of age.9

Moreover, tobacco-related health conditions impact all genders. For example, according to most recent reports:

- Men who smoke increase their risk of dying from cancer of the trachea, lung, and bronchus by more than 23 times.
- Men who smoke increase their risk of dying from chronic obstructive pulmonary disease (COPD) conditions such as: bronchitis and emphysema by 17 times.
- Smoking increases the risk of dying from heart disease among middle-aged men by almost four times.
- Women who smoke increase their risk of dying from bronchitis and emphysema by 12 times.
- Women who smoke increase their risk of dying from cancer of the trachea, lung, and bronchus by more than 12 times.¹⁰

In addition, smokeless tobacco products increase the risk for medical conditions such as: some cancers, heart disease and stroke and associated mortality.¹¹

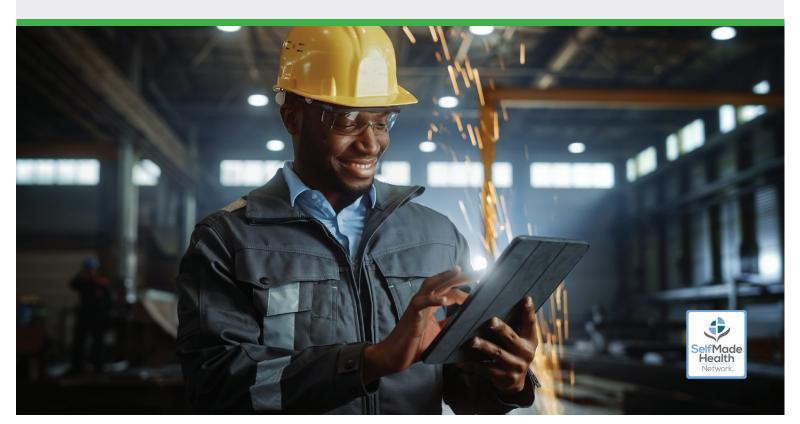
Lastly, as noted in the Closing Gaps in Cancer Screening: Connecting People, Communities, and Systems to Improve Equity and Access Report, "the avoidable burden of cancer imposes a heavy physical, emotional, and economic toll on individuals, families, and communities around the country. It also has broader economic implications, reducing workforce productivity and adding unnecessary strain to the healthcare system." 12

What is Cancer Survivorship?

According to the *American Cancer Society's* most recent statistics, approximately 5,250 Americans are diagnosed with cancer (new cases) and approximately 1,670 Americans lose their lives to cancer each day.¹³ And in 1986; the phrase "cancer survivorship" was defined by the National Coalition

of Cancer Survivorship to describe "this broad experience on the cancer continuum — living with, through, and beyond a cancer diagnosis." ¹⁴ Cancer survivorship focuses on addressing the needs of cancer survivors. Many aspects of quality of life are interconnected. For instance,

financial well-being impacts multiple aspects of quality of life (physical, psychological, and social). Individuals with cancer may transition in and out of phases of cancer survivorship. The needs for cancer survivors may vary during different phases of cancer survivorship.



Prevention of Tobacco-Related Cancers and Improving Cancer Survivorship Are Good for the Economy, Employers, and Employees in All States and Regions

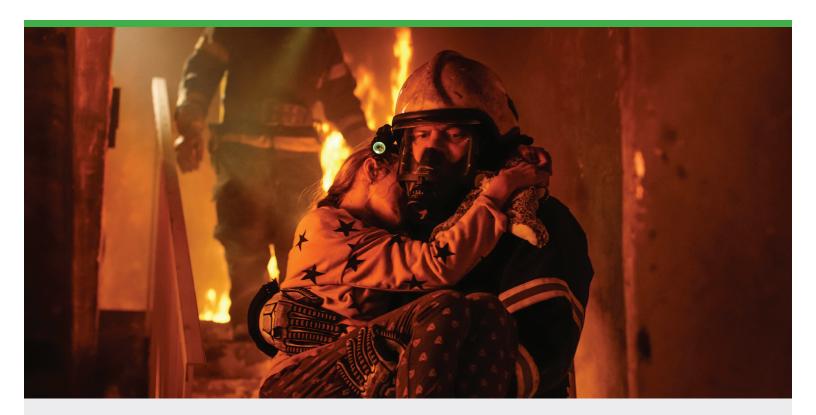
Possibilities exist to incorporate effective, low cost, embeddable programs have the potential to improve the health and work life of employees.¹⁵

Employers are in an optimal position to seek collaborations and partnerships that enhance health benefits and connect to employees to cancer prevention and survivorship services (physical, psychological, and financial support). For example, one worksite in Western Kentucky reached out to a Kentucky Cancer Program Regional Cancer Control Specialist for additional guidance in providing support and resources to employees. "We have a few too many folks who are battling cancer and I'd like to spend

some time talking to you about it." He was especially concerned about an employee who was faced with relapse of a previous cancer. The employee was living far away from her friends and family who supported her in her initial diagnosis. This manager wanted to surround the individual with a caring and supportive atmosphere to meet her individual needs while going through treatment. The Kentucky Cancer Program representative and the worksite manager had a good conversation about specific ways to provide a supportive environment, and a list of organizations and accompanying websites were given to him. 16 Kentucky Cancer Program

Even when people have good insurance, a major illness can bring unexpected expenses and financial hardships. Adults in households with annual incomes under \$40,000 are more than three times as likely as adults in households with incomes over \$90,000 to say it is difficult to afford their health care costs (69% v. 21%).17 Moreover, reports have revealed that among adults ages 18-64 with employer-sponsored or self-purchased health insurance, half of those with higher or highest deductible plans say they or a family member has put off getting the health care they needed due to the cost, compared to four in ten (41%) with lower or zero deductible plans.18





Reducing Tobacco Use and Risks Attributed to Tobacco-related Cancers

Tobacco addiction can be challenging and complex. Recent data from the University of Kentucky BREATHE (Bridging Research Efforts and Advocacy Toward Healthy Environments) and Kentucky Center for Smoke-free Policy team found that Kentucky employers are spending an estimated total of \$262 million dollars a month in costs related to cigarette smoking.¹⁹

Smoking can also cause cancer almost anywhere in the body including: mouth and throat; esophagus; voice box (larynx); lung, bronchus and trachea; acute myeloid leukemia; liver; kidney and renal pelvis; stomach; urinary bladder; pancreas; uterine cervix and colon and rectum.²⁰

Radon exposure is another risk factor associated with lung cancer. Radon is the 2nd leading cause of lung cancer. Radon is a naturally occurring radioactive gas that cannot be seen, smelled, or tasted. Radon can enter any type of building (homes, offices) through cracks in the basement or foundation. Radon attaches to dust or tobacco smoke and gets carried into the lungs.²¹

One of the best investments in the health of a business and employees is to help employees quit smoking and other forms of tobacco. Studies have shown that businesses offering tobacco cessation benefits report an increased number of smokers willing to participate in cessation treatment as well as an increase in those who successfully quit.²² Employers can help keep their employees healthy by investing in and incentivizing tobacco cessation opportunities.

When employers prevent secondhand smoke exposure in work environments, they support prevention of tobaccorelated cancer and medical conditions in the workplace. The adoption of tobacco-free and comprehensive smoke-free policies combined with the provision of tobacco cessation services support and sustain a healthier worksite for all employees and visitors.

Comprehensive Tobacco Cessation Benefits

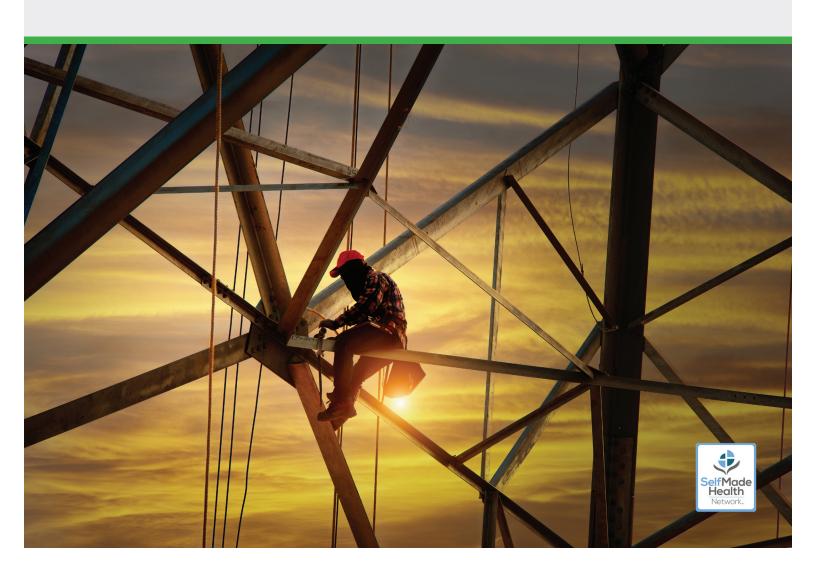
The *gold standard* of tobacco cessation coverage is based on the United States Public Health Service (USPHS) Clinical Practice Guidelines for Treating Tobacco Use and Dependence, which are universal and deemed effective.

- No prior authorizations, co-pays or other financial barriers for medication support or cessation counseling
- ✓ At least a 90-day supply of all Food and Drug Administration (FDA) approved medications
- ✓ All 3 forms of tobacco cessation counseling (individual, group and phone)
- ✓ A minimum of 4 tobacco cessation counseling sessions annually
- ✓ At least 2 tobacco quit attempts annually



Numerous Opportunities Exist for Employers to Cultivate a more Supportive Environment by Supporting Cancer Prevention and Survivorship in the Workplace

- Structure health benefits and employee health incentives to include providing time off for employees to schedule medical appointments for lung cancer screening. Lung cancer screening is best when combined with quitting tobacco and reducing exposure to secondhand smoke as well as radon.
- Coordination of on-site screening activities with local health systems at worksites would enable high volumes of workers to receive preventive care with reduced work disruption. And consider conducting multiple screenings (colorectal cancer, breast cancer, heart health, diabetes) at the same on-site health event on a quarterly, semi-annual, or annual basis. Lastly, develop worksite-healthcare linkages that coordinate activities to support employees with abnormal test results to follow-up with healthcare providers.
- Promote ongoing awareness among multiple divisions or departments and all employees (part-time, seasonal, temporary, contractual) about the availability of free and confidential state tobacco quitline services at: 1-800-QUIT-NOW. These services are available to all businesses ranging from small businesses (1-100 employees) to large corporations regardless of industry or sector.
- Ensure the employee-sponsored health insurance covers FDA approved cessation medications and evidence-based cessation counseling for quitting smoking; eliminating or reducing co-pays and other cost-sharing on medications and counseling as well as leverage employee health or worksite wellness staff to promote access to free, confidential, and evidence-based tobacco cessation counseling available to all employees and their families via the state tobacco quitline at: 1-800-QUIT-NOW.
- Establish collaborations between local health systems (including primary care associations, federally qualified health centers, rural health clinics, national association of free and charitable clinics) and employee health departments, worksite wellness and occupational health departments at chemical plants, manufacturing plants, warehouses, industrial plants, construction, mining, oil/gas, other blue-collar industries and factories to combine access to the free and confidential telephonic tobacco cessation services (state quitline-1-800-QUIT-NOW) with the provision of on-site tobacco cessation services from local health systems to further support tobacco user workers requiring more extensive cessation services.
- Structure health benefits plans that encourage compliance with recommended routine cancer screenings and other services throughout the cancer continuum of care to prevent "late" stage cancer diagnosis.



- Employers can also reduce employee exposure to radon through testing the workplace for radon using a short-term test. And employers can also encourage their employees to test their homes for radon.
- Consider partnering with similar industries or sectors located in the same county or adjacent/neighboring counties by convening employee health meetings with local health systems using resources that feature state/county level data (geography data) such as the CDC's United States Cancer Statistics (USCS): Data Visualization tool with geography data at: https://gis.cdc.gov/Cancer/USCS/#/AtAGlance/ enhance or strengthen the company's health-related activities and benefits throughout a shared region within the state.
- Convene employee health meetings using resources that feature state level data such as: America's Health Rankings Annual Report (Health Outcomes-Chronic Conditions section) at: https://www.americashealthrankings.org/explore/annual/measure/ PrevHosp/state/ALL to enhance or strengthen the company's health-related activities and benefits.

- Sponsor promotional and educational activities throughout the year to increase awareness and knowledge of comprehensive Tobacco Cessation Coverage (state specific benefits) among employees (including full-time, part-time), their spouses and other family members.
- Manage disability and leave benefits (including paid sick leave) to support compliance with cancer treatment and recovery as well as return to work options.
- Explore and maximize opportunities for Employee Health Departments to partner with a local or regional network of oncology nurse navigators, patient navigators or community health workers (CHWs).



To learn more, please feel free to contact us.

Dwana "Dee" Calhoun, MS National Network Director of SelfMade Health Network (SMHN) at: d.calhoun@selfmadehealth.org

http://www.selfmadehealth.org/ | WeselfMadeHealth



CDC Funding Disclosure Statement: Supported by the Centers for Disease Control and Prevention (CDC) Cooperative Agreement (DP18-1808) Networking2Save: CDC's National Network Approach to Preventing and Controlling Tobacco-related Cancers in Special Populations.



References:

- National Cancer Institute (NCI) Office of Cancer Survivorship. Statistics and Graphs at: https://cancercontrol.cancer.gov/ocs/statistics#:~:text=As%20of%20January%202022%2C%20it,approximately%205.4%25%20of%20the%20population.&text=The%20number%20of%20cancer%20survivors,to%2022.5%20million%2C%20by%202032
- Designing and Managing Wellness Programs. Society for Human Resource Management (SHRM) at: https://www.shrm.org/resourcesandtools/tools-and-samples/toolkits/pages/designingandmanagingwellnessprograms.aspx
- 3. Shiels MS, Haque AT, Berrington de González A, Freedman ND. Leading Causes of Death in the US During the COVID-19 Pandemic, March 2020 to October 2021. JAMA Intern Med. Published online July 05, 2022.
- Centers for Disease Control and Prevention (CDC)-Health Effects from Secondhand Smoke at: https://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/health_effects/index.htm
- 5. Health Risk of Radon. United States Environmental Protection Agency (EPA) at: https://www.epa.gov/radon/health-risk-radon
- 6. Workplace Wellness. September 2021. United States Chamber of Commerce at: https://www.uschamber.com/health-care/workplace-wellness
- 7. Five Tips to Implement Corporate Health and Wellness- Small Business. Forbes at: https://www.forbes.com/sites/forbesbusinesscouncil/2022/07/13/five-tips-to-implement-a-corporate-health-and-wellness-program-employees-will-love/?sh=52b9916674f0
- 8. Bierman AS, Wang J, O'Malley PG, Moss DK. Transforming care for people with multiple chronic conditions: Agency for Healthcare Research and Quality's research agenda. Health Serv Res. 2021 Oct;56 Suppl 1(Suppl 1):973-979. doi: 10.1111/1475-6773.13863. Epub 2021 Sep 6. PMID: 34378192; PMCID: PMC8515222
- 9. Jiang C, Deng L, Karr MA, Wen Y, Wang Q, Perimbeti S, Shapiro CL, Han X. Chronic comorbid conditions among adult cancer survivors in the United States: Results from the National Health Interview Survey, 2002-2018. Cancer. 2022 Feb 15;128(4):828-838. doi: 10.1002/cncr.33981. Epub 2021 Oct 27. PMID: 34706057; PMCID: PMC8792209.
- 10. Centers for Disease Control and Prevention (CDC). Tobacco-related Mortality at: https://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/tobacco_related_mortality/index.htm#:~:text=The%20major%20causes%20of%20excess,and%20respiratory%20and%20vascular%20disease
- Centers for Disease Control and Prevention (CDC). Smokeless Tobacco: Health Effects at: https://www.cdc.gov/tobacco/data_statistics/fact_sheets/smokeless/health_effects/index.htm#cancer
- 12. Closing Gaps in Cancer Screening: Connecting People, Communities, and Systems to Improve Equity and Access. A Report from the President's Cancer Panel to the President of the. United States. Bethesda (MD): President s Cancer Panel; 2022. Accessed at: https://prescancerpanel.cancer.gov/report/cancerscreening/Part1.html
- 13. American Cancer Society. 2022 Cancer Statistics Center. Accessed at: https://cancerstatisticscenter.cancer.org/#!/
- 14. National Coalition for Cancer Survivorship. Accessed at: https://canceradvocacy.org/defining-cancer-survivorship/
- 15. Wilson MG, DeJoy DM, Vandenberg RJ, et al. Translating CDSMP to the Workplace: Results of the Live Healthy Work Healthy Program. American Journal of Health Promotion. 2021;35(4):491-502. doi:10.1177/0890117120968031
- 16. Kentucky Cancer Program at: http://www.kycancerprogram.org/about-us
- 17. Health Care Debt in the U.S. The Broad Consequences of Medical and Dental Bills. KFF. June 16, 2022. Accessed at: Health Care Debt In The U.S.: The Broad Consequences Of Medical And Dental Bills Main Findings 9957 | KFF
- 18. Americans' Challenges with Health Care Costs. KFF. July 14, 2022. Accessed at: https://www.kff.org/health-costs/issue-brief/americans-challenges-with-health-care-costs/
- 19. Kentucky Center for Smoke-free Policy. (2022, February). Estimated Monthly and Annual Costs to Employers from Cigarette Smoking by County. Accessed at: https://www.uky.edu/breathe/sites/breathe.uky.edu/files/Employment%20Costs%20from%20Tobacco%20by%20County%20021622%20B.pdf
- 20. Centers for Disease Control and Prevention. (2021, April 2). Smoking & Tobacco Use: Cancer. Retrieved August 26, 2022 at: https://www.cdc.gov/tobacco/basic_information/health_effects/cancer/index.htm
- 21. Centers for Disease Control and Prevention (CDC) What Are The Risk Factors for Lung Cancer? Accessed at: https://www.cdc.gov/cancer/lung/basic_info/risk_factors.htm#:~:text=Over%20long%20periods%20of%20time,people%20who%20don%27t%20smoke
- 22. Centers for Disease Control and Prevention (CDC)- Coverage for Tobacco Use Cessation Treatment at: https://www.cdc.gov/tobacco/quit_smoking/cessation/coverage/index.htm



Resources:

United States Cancer Statistics (USCS)-Data Visualizations Tool (including state level data)

https://www.cdc.gov/cancer/dcpc/data/index.htm

America's Health Rankings Annual Report

https://www.americashealthrankings.org/explore/annual/measure/PrevHosp/state/ALL

American College of Radiology (ACR) Podcasts:

Lung Cancer Screening and the Veteran Experience: Past, Present, and Future Stigma and Nihilism in Lung Cancer Care and Control (Part 1 and Part 2) Social Determinants of Health and Lung Cancer Care and Control

https://www.acr.org/Clinical-Resources/Lung-Cancer-Screening-Resources/Lung-Cancer-Podcast

National Institute for Occupational Safety and Health (NIOSH) – Cancer, Reproductive, Cardiovascular, and Other Chronic Disease Prevention Program (includes Worker Health Charts by industry/occupation) at:

https://www.cdc.gov/niosh/programs/crcd/default.html

Eligibility Criteria, Prior Authorization, and Copayment Information for State Medicaid Fee-For-Services Programs Covering Lung Cancer Screening (American Lung Association)

https://www.lung.org/getmedia/e9bc33b0-2373-46a9-b731-9e232b11f184/ec,-copay,-pa-table-09292020-update.pdf (a.g., a.g., b., a.g., b.,

CDC Total Health Worker: Making the Business Case Why Do I Need An Integrated Approach to Safety and Health?

https://www.cdc.gov/niosh/twh/business.html

National Cancer Institute (NCI)-Cancer Support Services

https://www.cancer.gov/about-cancer/managing-care/services/support

CancerCare Services and Workplace Support

https://www.cancercare.org/services

Kentucky Cancer Consortium Lung Cancer Network: A Collaboration Success Story

https://www.kycancerc.org/wp-content/uploads/sites/14/2022/05/Lung-Network-Infographic-05122022.pdf

State Tobacco Cessation Coverage Database (sponsored by the American Lung Association) at:

http://www.lung.org/our-initiatives/tobacco/cessation-and-prevention/state-cessation-coverage.html

CDC - Colorectal Cancer Control Program (CRCCP)

https://www.cdc.gov/cancer/crccp/

Kentucky Cancer Consortium Cancer Survivorship Series (Quality of Life)

https://www.kycancerc.org/2022/02/22/cancer-survivorship-series/

Cancer in the Workplace: Human Resources (HR) Department Tip Sheet (Business Group on Health). Access on July 28, 2022 at:

https://www.businessgrouphealth.org/resources/cancer-hr-tip-sheet

CDC- Radon and Your Health (Radon Testing Kit Information)

https://www.cdc.gov/nceh/features/protect-home-radon/index.html

Care and Cancer Support: From Health Systems to Employers webinar (August 2022). National Coalition for Cancer Survivorship at:

https://canceradvocacy.org/webinar-care-career-support-from-health-systems-to-employers/

Cancer Care: Managing Costs and Medical Information (National Cancer Institute)

https://www.cancer.gov/about-cancer/managing-care/track-care-costs

Lung Cancer Screening Health Insurance Coverage Resources (American Lung Association)

https://www.lung.org/lung-health-diseases/lung-disease-lookup/lung-cancer/saved-by-the-scan

Radon: Worker and Employer Guide to Hazards and Recommended Controls

https://www.hud.gov/sites/documents/IEPWG_RADONWORKER_FINAL.PDF

CDC Tips from Former Smokers Campaign Resources-Partners

https://www.cdc.gov/tobacco/campaign/tips/partners/php/index.html



Resources continued:

State Lung Cancer Screening Toolkit (American Lung Association)

https://www.lung.org/lung-health-diseases/lung-disease-lookup/lung-cancer/saved-by-the-scan/resources/state-lung-cancer-screening

Radon Communication Materials. Centers for Disease Control and Prevention (CDC)

https://www.cdc.gov/radon/communications/index.htm

State of Lung Cancer Report (State level data)-American Lung Association

https://www.lung.org/research/state-of-lung-cancer

Academy of Oncology Nurses & Patient Navigators- Local Oncology Nurse Navigator Networks

https://www.aonnonline.org/community/local-navigator-networks/

Cancer and Careers Organization: Resources for Cancer Survivors/Employee Health:

https://www.cancerandcareers.org/en/about-us

Seven Ways Businesses Can Align with Public Health for Bold Action and Innovation at:

https://debeaumont.org/businesspublichealth/

 $SelfMade\ Health\ Network\ (SMHN)\ Fact\ Sheet\ Series:\ Coronavirus\ (COVID-19)\ and\ Cancer\ Survivorship\ at:$

https://selfmadehealth.org/educate/determinants-of-health-fact-sheets/

Cancer Survivorship Checklist. National Coalition for Cancer Survivorship (NCCS) at:

https://canceradvocacy.org/resources/survivorship-checklist/

Chronic Obstructive Pulmonary Disease (COPD) Foundation at:

https://www.copdfoundation.org/

Employers do care about their employees but may possess limited resources to address or sustain optimal employee health. However, every day is an opportunity to fundamentally change the trajectory of cancer in every region, state, county, parish, and community. Cancer transcends regional belts: Rust Belt, Wheat Belt, Sun Belt, Corn Belt, Stroke Belt, Rice Belt, Jell-O Belt, and Frost Belt as well as income. *SelfMade Health Network (SMHN)*

We would like to acknowledge the significant contribution of the Kentucky Regional Resource Lead Organization (University of Kentucky College of Public Health, Kentucky Cancer Program and Kentucky Cancer Consortium) to the development of this fact sheet.

