



# The Wingspan

ScreenND Newsletter  
July 2026

## HAPPY 250TH BIRTHDAY, AMERICA!



As we celebrate our nation's 250th birthday, we're reminded that America's strength has always come from looking ahead and investing in a healthier future.

Just as we honor 250 years of progress, we want to thank each of you for your commitment to improving colorectal, breast and cervical cancer screening in your communities. Your efforts help ensure that more people benefit from early detection and timely care, creating healthier futures for generations to come. As we mark this historic milestone, we celebrate the progress we've made together and the lives that continue to be impacted through your dedication to cancer screening improvement.

## DASHBOARD

From American Cancer Society, [Cancer Facts & Figures, 2026](#), the estimated numbers of diagnoses and deaths in North Dakota are:

| Cancer Type                 | Expected New Diagnoses | Expected Deaths |
|-----------------------------|------------------------|-----------------|
| Breast (female)             | 710                    | 90              |
| Cervical (uterine cervix)   | 40                     | 10              |
| Colorectal (colon & rectum) | 390                    | 140             |

Because finding cancer early can change everything, we're dedicated to detecting every case at its earliest stage.

## NEWS

### GET:SCREENED Program Updates: Action Required for Participating Facilities



The North Dakota Colorectal Cancer Screening Initiative (NDCRCIS) is now GET:SCREENED. Along with this name change, the program has transitioned claims processing from Blue Cross Blue Shield North Dakota (BCBSND) to Mountain Pacific effective June 30, 2026.

## FEATURED RESOURCE

YouTube: [Real Lives: Cancer Stories of Indigenous People presented by the American Cancer Society](#)



## P2P SHARING

### Join an North Dakota Cancer Coalition Roundtable (NDCCRT) Workgroup and Help Advance Colorectal Cancer (CRC) Screening in North Dakota

Following the successful Action Lab at the NDCCRT Annual Meeting on April 30, we're turning ideas into action. Through a collaborative crowdsourcing activity, members identified practical strategies to improve CRC screening across North Dakota. To move this work forward, NDCCRT is launching four workgroups and invites members to get involved.

Workgroup opportunities include:

- Awareness, Policy & Sustainability – Increase CRC awareness, support policy initiatives and build sustainable systems that promote screening and early detection.
- Provider Engagement & Health Systems Improvement – Strengthen clinical practices, improve care processes and support providers in recommending and tracking screening.
- Screening Access & Uptake – Enhance patient outreach, navigation and follow-through to increase screening completion rates statewide.
- Health Equity & Priority Populations – Address disparities in CRC screening and outcomes through targeted outreach and community partnerships.

Whether you can participate regularly or contribute occasionally, your expertise and perspective are valuable. Workgroup activities are expected to begin in late summer, with workgroup leads and next steps announced once membership is finalized.

Interested in joining? Contact Jill Ireland at [jill.ireland@cancer.org](mailto:jill.ireland@cancer.org) by July 24 to sign up for one or more workgroups.

Together, we can continue making meaningful progress toward improving colorectal cancer outcomes across North Dakota.

What facilities need to do:

- Complete Mountain Pacific vendor enrollment forms at [www.ndgetscreened.org/vendorforms](http://www.ndgetscreened.org/vendorforms)
- Submit all GET:SCREENED claims through [www.ndgetscreened.org/bill](http://www.ndgetscreened.org/bill)
- Review the [What's Covered](#) document on the website for approved services, CPT codes, and reimbursement rates.

Important reminders:

- BCBSND claims processing ended June 30, 2026, based on the claim receipt date, not the date of service.
- Most payments will be issued via Electronic Funds Transfer (EFT). Facilities will receive remittance information identifying the GET:SCREENED ID, medical record ID, covered services and billing codes.
- Payment summaries may be requested at any time by contacting [info@ndgetscreened.org](mailto:info@ndgetscreened.org) or 1-833-220-2981.

For additional information and resources, visit [www.ndgetscreened.org](http://www.ndgetscreened.org) or contact us at [info@ndgetscreened.org](mailto:info@ndgetscreened.org).

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### A Smarter Way to Screen for Breast Cancer is Emerging | Science Daily - Jan 4, 2026

A groundbreaking study shows that breast cancer screening works better when it's personalized. Instead of annual mammograms for all, women were screened based on genetics, health history, and lifestyle factors. This approach reduced advanced cancers without increasing risk for those screened less often. Most women preferred the personalized model, hinting at a major shift in future screening guidelines.

[Read full article...](#)

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### Routine cancer screening and medical appointment behaviors

Routine cancer screenings can help prevent cancer or catch it early, when treatment is most effective. Yet new data show fear of a diagnosis is no longer the only reason people are avoiding screenings.

Findings from the Prevent Cancer Foundation's **2026 Early Detection Survey** reveal that concern about the cost of routine cancer screenings now rivals the fear of being diagnosed with cancer.

[Read more...](#)

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## UPCOMING EVENTS AND PAST EVENT RECORDINGS

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### American Cancer Society: Emerging Strategies in Early Detection Webinar

July 28, 2026, 2 pm CT

[Register](#)

### 2026 ACS National Colorectal Cancer Roundtable Annual Meeting

Nov 18-20, 2026 | San Antonio, TX

[Learn More](#)

### Recording: [You Got the Letter: What to Do Next After a Dense Breast Notification](#)

June 30, 2026

Resource: [Breast Density and Your Mammogram Report](#)

### Recording: [Webinar: Inside the New ACS Colorectal Cancer Screening Guidelines](#)



Quality Health Associates  
of North Dakota

is now



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