

Mammography Community Celebrations

During May and June 2006, West Virginia Breast and Cervical Cancer Screening Program (WVBCCSP) Cancer Information Specialists (CIS), in partnership with the Ovarian Cancer Initiative and members of the local communities, developed community outreach celebrations to encourage women aged 50-64 to have a mammogram. Mammography Community Celebrations were conducted in Raleigh, Lewis, and Kanawha Counties.



Lewis County Community Celebration:

The Lewis County Community Celebration was paired with

INSIDE THIS ISSUE:	
CHRISTINA'S CORNER	2
CERVICAL HEALTH AWARENESS MONTH	3
MAMMOGRAPHY COMMUNITY CELEBRATIONS	4
BCCIPs	5
BREAST CANCER AWARENESS MONTH	6 & 7
REMINDERS	8
VOLUNTEER LUNCHEON	9
QUILTS OF HOPE	10
MEET WVBCCSP STAFF	11

the 4th Annual Free Pap Test Screening and Health Fair at Stonewall Jackson Memorial Hospital on May 12, 2006. As a result of the event, thirty-one women received WVBCCSP funded Pap tests, twenty-nine were enrolled into the Program, and eighteen were never or rarely screened for cervical cancer. Twenty-eight women ages 50-64 were referred for mammograms. Local organizations donated time, space, and money for the event. Other services offered included bone density screening, blood sugar testing, cholesterol screening, facial analyses by the American Cancer Society, skin cancer screening, and body mass index. *Continued on page 4*



Christina Mullins WVBCCSP Program Director

Christina's Corner:

In the past, I always saw Washington, DC from the perspective of a tourist, visiting the monuments and museums. During the second week of July, I had the opportunity to spend a week in the Capital City to attend the World Cancer Congress and the CDC Partners Summit. While

still a visitor to the city, I also became one of the many host citizens to thousands of international visitors who came together to share knowledge, experience, and best practices around cancer prevention, screening and treatment.

I must admit, I was somewhat overwhelmed to attend a meeting with 5,999 other people, but as we settled into the rhythm of meetings, food and more meetings, I began to make a few observations. The first thing I began to notice was that it really does not matter where you come from across the globe, poor people have higher rates of cancer, are less likely to be screened and have lower survival rates. It also struck me how fortunate and successful that the United States really is. One gentleman from India described a successful experience of conducting screening clinics for oral cancer with only his bare hands and a flashlight. That information put some of my daily grumblings about funding into a different perspective.

As the World Cancer Congress concluded I began to review the CDC Partners Summit agenda. As I read familiar names like Pamela Brown, Amy Reasinger Allen, and Hilda Heady, I began to look forward to hearing how West Virginia would contribute to this international platform. I must say they represented our state well by describing how we build infrastructure and partnerships with limited resources. It was gratifying to hear positive experiences about our state instead of the negative statistics that usually haunt us in the media and in statistical health reports.

In my darker moments of frustration, I sometimes wonder if we will ever change those grim health statistics. That is when that quick look around the globe helps to clear my vision. Together, we routinely conduct over 16,000 cancer screenings per year with more than just a flashlight and our bare hands. Thanks to the Medicaid Treatment Act, we now cover breast and cervical cancer treatment through our Medicaid program, and we have the opportunity to offer liquidbased cytology screening beginning in July of 2007. These things have been accomplished through our many layers of partnership, and I am eager to see what can be accomplished in the future. International conferences can be a challenging environment if you are trying to gather the so-called magic bullets, because we represent such a diverse background of experiences. However, it certainly does allow us an opportunity to take a step back and look at our progress and challenges from a different perspective.

Extra, Extra ... Hot Off the Press

The WVBCCSP Referral Provider Manual has been revised. The Cancer Information Specialists and the Clinical Services Coordinator will schedule on-site trainings for Winter 2006.

WVBCCSP Data Update

WVBCCSP data from 1991 through July 24, 2006

Number of women enrolled:	101,889
Number of Pap tests provided:	198,446
Number of mammograms provided:	128,405
Number of clinical breast exams provided:	182,374
Number of invasive breast cancers diagnosed:	604
Number of invasive cervical cancers diagnosed:	106

Cervical Health Awareness Month Set for January—Get Ready Now!

Did you know that January is Cervical Health Awareness Month? Cervical cancer is one of the most ommon cancers worldwide, and one of the most preventable and treatable. The estimated lifetime risk of woman developing cervical cancer is 1 in 135. Approximately 100 West Virginia women will be diagnosed /ith cervical cancer in 2006 and the state currently ranks third in the nation for deaths due to cervical ancer. This number could be greatly reduced if West Virginia women received routine Pap tests.

To stress the importance of routine Pap tests, the WVBCCSP promotes Cervical Health Awareness Ionth in several ways:

Join with several providers and American Cytology Services, to offer free Pap clinics during the month of January. To increase the number of participants attending a Free Pap Day, other services such as clinical breast exams and pelvic exams are offered Some clinics also include cholesterol screening, hemoglobin testing, blood pressure testing, and other health related information.

Join with several providers to host a breakfast or lunch meeting to provide updates on cervical cancer to the public and/or professionals.

Send out press releases about cervical cancer and related stories to newspapers and radio stations throughout the state.

Complete newspaper, television, and radio interviews around the state.

Display eduational materials and distribute literature in various counties.

'lease consider joining forces with your Cancer Information Specialist to develop an outreach project in our area.

Tracking Patients Who Are Lost to Follow-Up or Have Refused Further Treatment

When a WVBCCSP patient has an abnormal finding but is *Lost to Follow-Up* or has *Refused* a procedure or treatment, providers are required to make a minimum of three (3) attempts to contact her. The first and second attempts may be by telephone. However, if there are two (2) unsuccessful efforts to reach the woman by phone, you must send her a *Certified Letter* with "return receipt requested." The letter should emphasize the importance of contacting her screening provider for further information and follow-up. Also, the WVBCCSP must be notified.

Here's how to notify the WVBCCSP about a patient who is Lost to Follow-Up or has Refused additional services:

- 1. On the Breast and/or Cervical Diagnostic Work Up Report form (Y408) complete the *Status of Final Diagnosis* section as either:
 - Lost to Follow-Up: When all attempts at contacting a patient are unsuccessful and the contact has been terminated with documentation in the patient's medical record.

OR

- **Refused**: When a patient refuses to have a procedure or treatment.
- 2. Attach a copy of the <u>Certified Letter</u> to the Breast and/or Cervical Diagnostic Work Up Report form (Y408) and mail to the WVBCCSP.

Mammography Community Celebrations Continued from page 1

Charleston Community Celebration:

The Region 3 CIS partnered with the African American Women's Health Expo on Saturday, June 17, 2006, at the Charleston Civic Center. The Expo was a forum for free health screenings and for information on local health and community organizations. Stations were set up so that participants could have their blood pressure taken and be screened for stroke, diabetes, high cholesterol, HIV, and breast and cervical cancer. Over 650 women attended the Expo with 100 of those women being screened for WVBCCSP eligibility. Among those 100 women, fifty women received clinical breast exams, eighteen received Pap tests, twenty-five were enrolled into the Program, and twelve were referred for mammograms.

Beckley Community Celebration:

A day full of activities was created to encourage women to get their annual Pap test, clinical breast exam, and/or mammogram—completely free! This Mammography Community Celebration was held June 21, 2006, at the Elinor Hurt Health Department in Beckley. Two hundred women signed up to receive free screenings. Thirty-three women were WVBCCSP eligible, of which thirty were between the ages of 50-64. Participating partners offered additional services during the celebration, including free blood pressure readings, body mass index analyses, bone density tests, facials,

and hand and chair massages. Other organizations donated food, water, and advertising funds.

These celebrations provided unique opportunities to screen women in convenient locations in their communities. Women and healthcare providers assisted in the planning and implementation of the events. Thanks to all who assisted in this effort. More celebrations are planned for Spring 2007.







Breast and Cervical Cancer Information Programs (BCCIPs)



Beckley



WVBCCSP Staff in Charleston



Morgantown

The WVBCCSP conducted four Breast and Cervical Cancer Information Programs (BCCIPs) during May 2006. Over 270 WVBCCSP providers attended BCCIPs in Beckley, Charleston, Morgantown, and Shepherdstown. Training focused on five main areas: providing an overview of breast and cervical cancer screening policies; presenting a Case Management update; identifying current clinical issues regarding breast and cervical cancer screening; giving an overview of the Human Papillomavirus and discussing strategies for talking with patients; and reviewing the results of a recent focus group project that revealed characteristics, knowledge, and preferences of low-income WV women. At the end of each session Christina Mullins, Program Director, facilitated a Provider Forum that allowed providers to actively engage in a dialogue with the Program staff and each other.

West Virginia Celebrates Breast



During October, the WVBCCSP Cancer Information Specialists, volunteers, providers, and

community organizations showed their continued support in the fight

against breast cancer. Twenty-three Walks for Women, an increase of two over last year, were held acress the state with volunteers raising over \$70,000 for the West Virginia Breast and



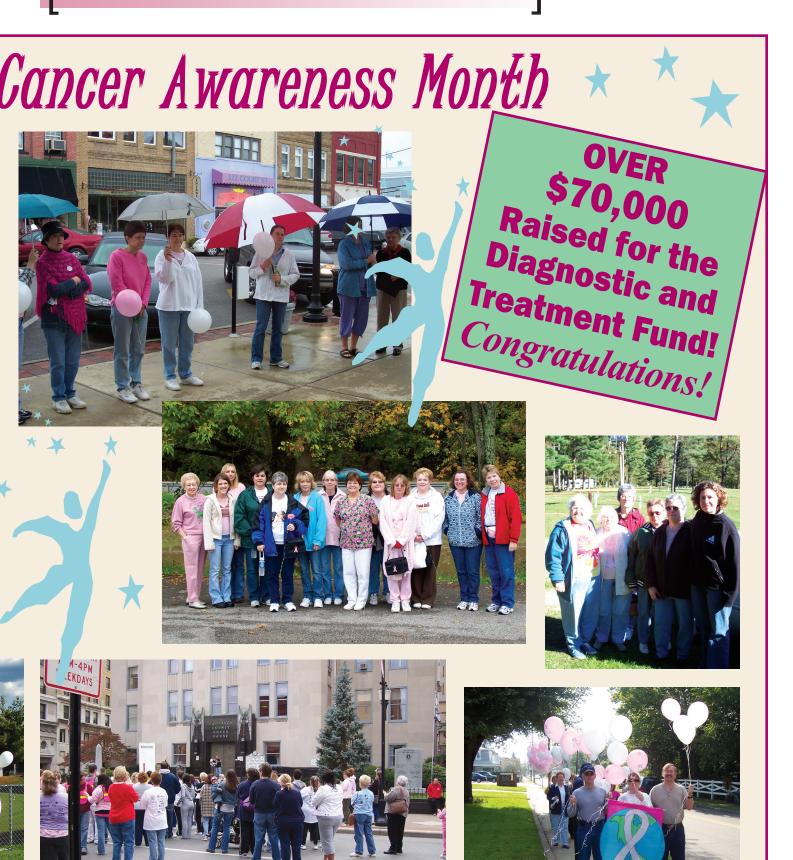
Cervical Cancer Diagnostic and Treatment Fund.

More than 150 other events were held throughout the month and included free screening clinics, health fairs, dinners, wreath hangings, balloon launches and much more. Program staff used every event as an opportunity to talk to women about the importance of early detection.









WVBCCSP Paperwork Reminders

With all of the WVBCCSP paperwork, it's easy to forget things. Please read the list below for a few commonly forgotten items: **Informed Consent Form**

• The information on the Informed Consent Form (Y102) must be reviewed with the patient prior to her signing the form. Her signature indicates that she understands the WVBCCSP and wishes to enroll in it. After she signs the form and completes her address and phone number, then the clinic staff who reviewed the form with the patient signs as the "Witness." This verifies that the woman was informed of the screening services she would be receiving as a participant in the Program.

Client Enrollment Form

- It is important to complete **all** sections of the <u>Client Enrollment Form</u> (Y104) at the patient's initial visit or referral for enrollment visit. All of the information asked for on this form is required in order to start a data file on the woman in the WVBCCSP data system. This information is used for tracking purposes and for reporting to the Centers for Disease Control and Prevention.
- Please make sure that all information is completed in the Enrollment Information section (grey box), in order for the WVBCCSP to accurately enroll the patient and to ensure timely reimbursement. This information includes:
 - 1. WVBCCSP provider name (Please spell out your full provider name. While acronyms do take less time to write, there are several clinics whose initials are the same.)
 - 2. Enrollment date
 - 3. WVBCCSP#
 - 4. Provider phone number
- Remember: The Client Enrollment Form must be mailed to the WVBCCSP within the week of the initial visit or referral for enrollment visit.

A Word From Tracking and Follow-Up

Each Tracking and Follow-Up Nurse is assigned a group of providers to work with, establishing a close relationship between providers and the Program. This relationship is an important part of the Program's success. Below are a few reminders from our Tracking and Follow-Up Nurses:

- All suspicious CBE results require a surgical consult. These results are listed on the **Patient Data Form** as:
 - 1. Bloody/Serous Nipple Discharge
 - 2. Discrete Palpable Mass (Suspicious of cancer)
 - 3. Nipple/Areolar /Scaliness
 - 4. Skin Dimpling or Retraction
- Abnormal mammogram and ultrasound results require a surgical consult.
- Ultrasounds are approved for payment ONLY when used as an adjunct to mammography.
- WVBCCSP will reimburse for two surgical consults each year per abnormal breast finding (initial consultation plus a follow-up).

WVBCCSP Volunteers Honored at Luncheon

The West Virginia Breast and Cervical Cancer Screening Program (WVBCCSP) volunteers were honored with a Volunteer Appreciation Luncheon on November 15, 2006, at the Days Inn in Flatwoods, WV. Over 125 volunteers were recognized for their





hard work and dedication promoting Breast

Cancer Awareness Month (BCAM). Stephenie Kennedy welcomed the volunteers and highlighted BCAM successes, while the Cancer Information Specialists gave an overview of each region's events. April Kaull spoke to the audience about her experience with statewide media and gave tips on how volunteers can promote their education and outreach activities during BCAM and throughout the year. The luncheon ended on a positive note with a light-up ceremony, where each volunteer shined ever so brightly in the fight against breast cancer. Thanks





to all of the volunteers for their continued commitment and support of the Program.





Coalition

Sponsored By: WV Breast and Cervical Cancer

creening Program

Breast Cancer Awareness Day Quilts of Hope: Breast Cancer Awareness Project

Every two years, quilters from around the state create beautiful masterpieces that serve as symbols of hope to women in their fight against breast cancer. This project is designed to increase awareness and allow volunteers a way to raise funds to support the West Virginia Breast and

Cervical Cancer Diagnostic and Treatment Fund. The Fund helps pay for lifesaving treatment for West Virginia women who are uninsured. Volunteers spend the first year designing and creating the quilts and the second year selling donation tickets for the quilts. As we are about to begin a new year, the quilters are prepared to begin their new quilt. A challenge fabric was chosen at this year's



Volunteer Appreciation Luncheon. Each group receives the same amount of the challenge fabric to begin their design. Other fabrics used are chosen by the individual groups.

The 2004-2006 Quilt Project raised over \$25,000 for the West Virginia Diagnostic and Treatment Fund and the quilters volunteered over 65,000 hours in designing, quilting, and selling donation tickets for the quilts. Sponsors of the Quilts of Hope are: the WV Comprehensive Cancer Control Coalition, the state quilt guilds, Mary Babb Randolph Cancer Center, Appalachian Community Cancer Network, and Jo Ann Fabrics and Crafts. Thanks to all the quilters for their hard work!









VOLUME 5 ISSUE 1

Getting to Xnow the WVBCCSP Staff

Janet Poling joined the WVBCCSP as a Nurse c) ase Manager for Regions 7 and 8. Janet holds a Jursing degree from St. Joseph's Hospital's School MNUT Nursing in Parkersburg, WV and also took classes f interest at Cleveland Community College in Jorth Carolina and WV State College. Janet forherly worked in the ICU at WVU, Department of urgery at CAMC General, as an office nurse for a Jrology practice, Occupational Health Nurse for American Cyanamid, and MDS Coordinator in the ong term care setting. Janet has had several inspiational role models during her nursing career. hese include physicians who took the time to teach ew concepts and other nurses and teachers who vere willing to share their experiences with her as he entered their areas of expertise.

Janet lived in several Eastern US states before eturning to WV in 1995. Moving frequently, due o her husband's employment, gave her the opporunity to try different areas of the nursing profes-P



Janet Poling, RN WVBCCSP Case Manager

sion and to develop friendships that have continued as she moved on to other endeavors. In October 2005, Janet and her husband moved from Charleston to Elkins, and she is pleased to have been chosen to work with the WV Breast and Cervical Cancer Screening Program in this area. Already, she has met several talented and enthusiastic team members and looks forward to meeting others that she has only communicated with by phone or through e-mail. Janet's hobbies include cooking, reading and hiking.

Colposcopy Reimbursement Guidelines for Women Under 25 Years of Age

Colposcopy is a reimbursable procedure for WVBCCSP women 25-64 years of age whose Pap test results indicate the need for the test.

The WVBCCSP makes one exception to this guideline:

- Women 18-24 years of age, (who meet WVBCCSP eligibility guidelines), with a Pap test result of HSIL, AGC, or ASC-H may be enrolled into the WVBCCSP and have her colposcopy paid for.
- If the younger woman needs further treatment as indicated by the colposcopy result, she may be referred to the WV Diagnostic and Treatment Fund or the Medicaid Treatment Act.

Please keep in mind that Medicaid Treatment Act enrollment for cervical problems can only be done as a result of an abnormal colposcopy result, not a Pap test result, when active treatment is planned.

A Reminder to Our Referral Providers

The WVBCCSP appreciates the services you provide to the women enrolled in our Program. We want to make sure that you receive timely reimbursement for the services you provide. In order to assist us with this process, please remember to attach a copy of the patient's report (i.e. procedure result, surgeon's clinical note, or pathology) to your billing invoice. Failure to send a copy of the report results in the invoice being returned to you and delays payment for services.





Don't forget.... if you have new staff at your clinic who will be working with WVBCCSP patients or paperwork, call your Cancer Information Specialist or the Clinical Services Coordinator to schedule a training session.