



WVBCCS
P R O V I D E R P R E S S

WINTER 2009

Better for the Planet, Better for the Budget: *Provider Press* Goes Green!

Everyone is experiencing the challenges of living and working during these tough economic times. The West Virginia Breast and Cervical Cancer Screening Program (WVBCCS) remains committed to providing potentially lifesaving screenings to eligible women who need our help, while running a fiscally responsible Program. The WVBCCS has been very fortunate that it has not experienced any budget cuts from the Centers for Disease Control and Prevention over the past several years. Many of our colleagues in the National Breast and Cervical Cancer Early Detection Program have not fared as well. Numerous programs around the country have had to stop providing screening services to eligible women mid-year because they simply do not have the funds left to provide services. In an effort to maximize the number of services the WVBCCS provides to our participants, which we expect to increase as the economy continues to worsen, we have been thinking of innovative strategies to make WVBCCS funding go further. One of these ways is to “go green” with the Provider Press.

Starting with the spring 2010 edition, the Provider Press will be sent out via email to all interested individuals and organizations, as well as continuing to be posted on our website (www.wvdhhr.org/bccsp). This will cut our printing and postage costs, which will allow us to provide more services to more eligible women. For example, by eliminating these costs, we can afford to pay for an additional 280 Pap tests per year. Increasing services isn't the only advantage. We will also expand our reach by allowing the newsletter to go to more people, increase the frequency of the newsletter from two editions each year to three, and reduce our carbon footprint by creating less waste. Great news for both our moms—Mother Earth and the woman that hounded you to eat your vegetables as a child!

How will this work? Inserted in this newsletter, you will



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find a subscription form. Complete it and fax or mail it back to the number/address listed on the form. It's that simple. Multiple people from your organization can sign up (i.e. make copies of the blank form if needed). We encourage anyone interested in receiving the newsletter to send us your contact information. This also allows us an additional venue for sending out updates and getting your opinions on programmatic issues.

We are excited about taking this “green” step forward and hope that you will continue to support us as we try to increase health screenings, while maintaining the quality of professional and public education services.

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Director's Dialog: *Changing Times*

Eight months into my position as Director of the West Virginia Breast and Cervical Cancer Screening Program (WVBCCSP), feeling like I finally have a handle on things, I find myself consumed with prospects of change. As the debate on health care reform swirls around us, how things will change still remains uncertain; that the health care system as we know it will change is a guarantee.

Many years ago I was introduced to the theory of change model. One thing I remember is that when moving from the current reality of what is to the idea of what is possible, a state of creative tension exists. Creative tension refers to the potential energy to achieve and accomplish goals. Instead of fearing the changes ahead, I invite you to view this as a time of exciting possibilities for us all. Instead of adopting a wait-and-see attitude, proactively engage in the process of change by participating in conversations and brainstorming sessions about creating a culture of health.

This fall I made two trips to Atlanta, one in September for the annual Well-Integrated Screening and Evaluation for Women Across the Nation (WISEWOMAN) meeting and again in November for the annual Breast and Cervical Cancer Early Detection Program conference. The Centers for Disease Control and Prevention (CDC) sponsored the two gatherings, and participants at both conveyed similar messages: as a nation we must make a “paradigm shift” in our practice of health care. This paradigm shift involves altering our perceptions about health care and how we deliver it. The new Director of CDC, Dr. Tom Frieden, encouraged us to adopt a new way of thinking about the role of public health as a catalyst for creating the conditions in which all people can be healthy.

Every serious proposal for health care reform includes a focus on prevention, including measures to promote healthier lifestyles and minimize the burden of disease. Dr. Frieden identified several models of prevention, including the WISEWOMAN program with its Lifestyle



Intervention component's focus on increasing physical activity, improving eating habits, and decreasing tobacco use. West Virginia was one of 22 states to receive WISEWOMAN funding, and as a result, integrated WISEWOMAN into the WVBCCSP in July 2008.

At a recent WVBCCSP/WISEWOMAN staff meeting, participants engaged in a creative thinking activity to design the “perfect program.” Staff brainstormed big ideas by thinking outside the box and with no financial constraints. The results were inspiring and affirmed much of what we are already doing: focusing on what's best for each individual woman; educating and encouraging women to take responsibility for their own health; removing existing barriers and inequities in the current health care system; assuring that all women have a local “medical home” where they establish ongoing partnerships with trusted health care providers; and increasing the availability of trained health educators to support women as they navigate the system for preventive care and diagnosis and treatment when needed.

I am inspired on a daily basis by the degree
Continued on next page

of expertise and caring demonstrated by the WVBCCS/WISEWOMAN staff. From those of us in the central office of the Bureau for Public Health in Charleston, WV, who administer all of the many details to ensure compliance with the policies of our federal and state funders; to the dedicated network of Cancer Information Specialists who are based in nine regions across the state each covering multiple counties and multiple responsibilities; to our partners at WVU who manage the outreach, recruitment, and education components of the program; to our many statewide collaborative partners; and to you, our providers, who handle our paperwork and policies with finesse and goodwill because you understand the value of the Program for the women in your practices. Finally, we are all thankful for the WV Bureau for Public Health;

Office of Maternal, Child, and Family Health; Division of Perinatal and Women's Health. They provide the vision, leadership and support for the work we do.

As we move into the uncharted waters ahead of us, I am confident that WVBCCS/WISEWOMAN will build on its strong foundation as a comprehensive public health program. We will continue to engage in meaningful partnerships with health care providers and program participants to inform and guide our future directions. We will work together to assure the health of all women by removing barriers to making healthy choices, by engaging in conversations that address the inequities in access to health resources, and by creating a culture of health in our homes, schools, workplaces, communities, our state, nation and the world.

P. S. Because this is intended to be a dialog, I welcome your ideas and comments. Please share your thoughts with me at Georgeann.Grubb@wv.gov.

Sincerely,



Save-the-Dates:

BCCIPs: 2010 dates and locations for the Breast and Cervical Cancer Information Programs (BCCIPs) are as follows:

- ◆ Tuesday, April 20, 2010: Blessed John XXIII Pastoral Center in Charleston, WV
- ◆ Wednesday, April 21, 2010: Tamarack in Beckley, WV
- ◆ Tuesday, April 27, 2010: WVU Erickson Alumni Center in Morgantown, WV

PHNPAT: Please note the new dates for the 2010 Public Health Nurses Physical Assessment Training and Refresher (PHNPAT/R):

- ◆ Tuesday, March 30–Thursday, April 1, 2010.

PHNPAT will be held at the WVU Erickson Alumni Center in Morgantown, WV. A room block will be reserved at the Euro-Suites hotel. Expect more information in early January 2010.

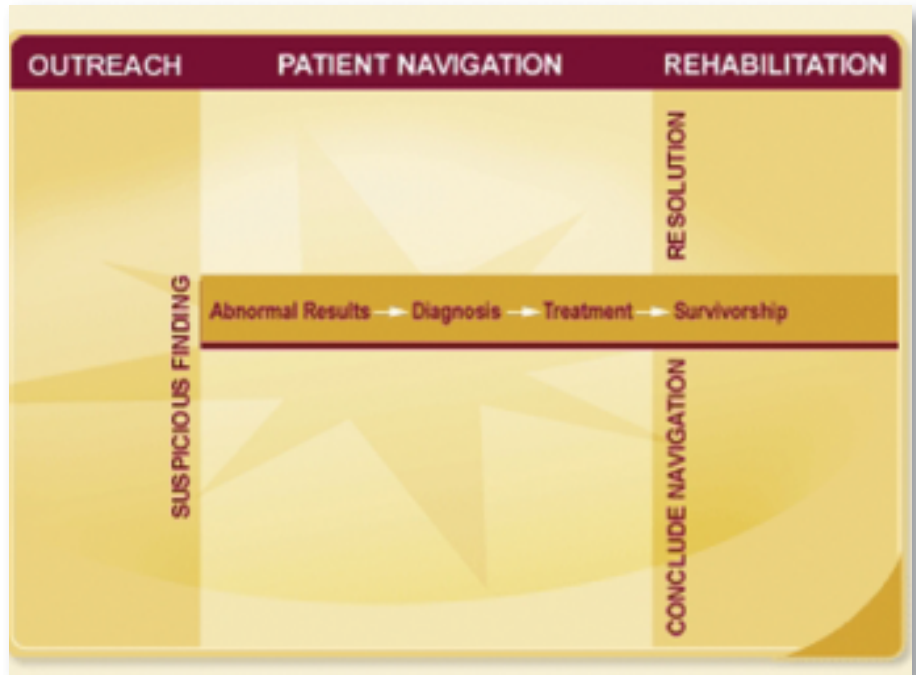
****IMPORTANT REMINDER FOR APRIL 2004 ATTENDEES:** If you attended the April 2004 PHNPAT and *were certified that year*, you are required to attend the 2010 PHNPAT/R to maintain your certification.

Building the Future of Cancer Patient Navigation in West Virginia

As case managers, nurses, social workers, and other health care providers, we often see patients struggling to navigate through the health care system, from appointments to treatment to payment and beyond. On November 12, 2009, the Quality of Life Subcommittee of the Mountains of Hope Cancer Coalition and Pfizer sponsored a conference in Charleston, WV, to address this issue. Participants discussed current challenges of cancer patient navigation in West Virginia and how they can help overcome the barriers to quality care for all patients.

Patient navigation is defined by the National Cancer Institute as assistance to patients as they move through the complexities of the health care system—getting them more timely treatment, more information about treatment options and preventive behaviors, just to name a few. Patient navigation spans the period from an abnormal finding through diagnostic testing and completion of cancer treatment. A patient navigation program may be time consuming and challenging to implement, but a few models currently exist that can serve as a starting point. The conference agenda covered those different models of implementation, including the Harold Freeman model, and as an example, Sharon Gentry, RN, MSN, AOCN, from the Derrick L. Davis Forsyth Regional Cancer Center in Winston-Salem, North Carolina, gave insight into the patient navigation program she helped jumpstart using grant monies from Susan G. Komen, her local breast clinic, and hospital. After 18 months of trying to figure out where the need was, Sharon was moved to the hospital where more patients could benefit from her services.

Patient navigation is more than a full-time



job. It requires a clear understanding of a patient's history and needs as well as being able to provide every possible option to the patient so that he/she can make an informed decision. Even so, the benefits of patient navigation are abundant. Patient navigators help to more accurately identify barriers to care, improve sharing of resources, enhance the continuity of care, improve quality of services, and increase patient satisfaction. By reducing or eliminating barriers to care and improving resources and quality of services, individuals can receive the screening and diagnostic tests they need, increasing early detection and treatment, and therefore reducing mortality and morbidity.

Perhaps the greatest benefit is for that of the patient. In a time when they are fighting through a dysfunctional system while struggling to save their very lives, professional help navigating the health care system can give them time to focus on what really matters—getting better. For more information about the West Virginia Patient Navigation Group, contact Jenny Ostien at jostien@hsc.wvu.edu.

WVBCCSP Screening Mammogram Reimbursement Policy:

- ◆ WVBCCSP enrolled women 50–64 years of age may receive a yearly Program funded screening mammogram.
- ◆ WVBCCSP enrolled women 40–49 years of age **MUST** have a high-risk factor for developing breast cancer* in order to receive a Program funded screening mammogram.
 - **One of the following risk factors must be documented on both the Patient Data and Referral Forms to ensure the mammogram is paid for by the WVBCCSP.**
 - ★ High-risk factors include:
 - ✓ Previous personal history of breast cancer or abnormal breast biopsy result
 - ✓ Family history of breast cancer
 - ✓ Never had children
 - ✓ First child born after age 30
- ◆ WVBCCSP enrolled women under the age of 40 years of age are not eligible for a Program funded screening mammogram.
 - ★ See *Diagnostic Mammogram Reimbursement Policy*, below.

WVBCCSP Diagnostic Mammogram Reimbursement Policy:

- ◆ Program enrolled women 25–64 years of age are eligible for a Program funded **diagnostic** mammogram with a clinical breast exam result of:
 - ✓ Discrete palpable mass (suspicious of cancer)
 - ✓ Bloody/serous nipple discharge
 - ✓ Nipple/areolar scaliness
 - ✓ Skin dimpling or retraction
- ◆ Clinical breast exam results **MUST** be documented on both the Patient Data and Referral Forms to ensure reimbursement by WVBCCSP.
- ◆ **IMPORTANT REMINDER:** *A surgical referral is required for these women, even if the mammogram and/or ultrasound results are **negative** or **benign**.*

In light of several recent reports about changing recommendations for the screening of breast and cervical cancer, the WVBCCSP will continue to follow the guidance of the Centers for Disease Control and Prevention. Coverage will continue as usual with more emphasis placed on having women talk to their healthcare provider regarding their individual need for breast and cervical cancer screenings. Providers will be notified immediately if policy changes are made. The WVBCCSP remains committed to the early detection of breast and cervical cancer.

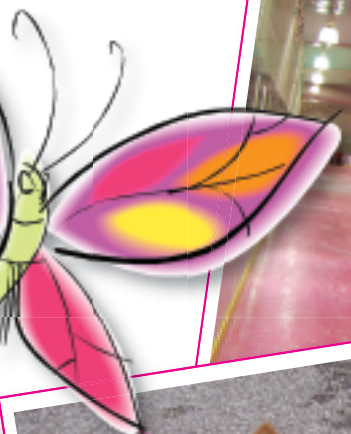
Breast Cancer Awareness Month

Breast Cancer Awareness Month is a time of healing for some women. For others, it's a time of remembrance. But for all, it's a time to fight back against a disease that has claimed the lives of so many women. Pink clad items line store shelves in October and vary from kitchen mixers and coffee mugs to watches and makeup bags. During October, WVBCCSP staff, volunteers, providers, and partners worked together to create awareness among community members and raise donations for the West Virginia Breast and Cervical Cancer Diagnostic and Treatment Fund. Every dollar raised directly benefits West Virginia women who might not otherwise be able to afford the necessary services.

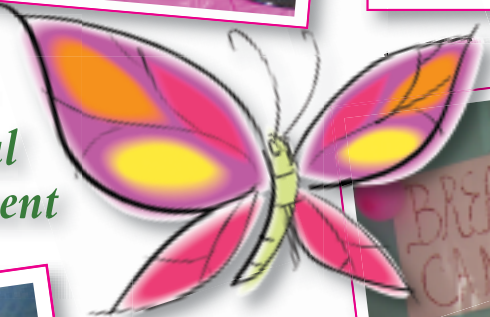
This year, a number of unique events marked the calendar in October. Such events included the Second Annual Ride for Breast Cancer Prevention in Martinsburg, WV, where motorcyclists traveled in packs along a local stretch of road while supporting a cause they believe in. A Dog Walk in Putnam County had animal lovers out and about with their furry friends dressed in pink accessories. Volunteers braved the chillier than usual weather to attend twenty statewide Walks for Women and numerous courthouse events, wreath hangings, balloon launches, and parades. One ice skating rink even dyed its ice pink to showcase its support.

The opportunities to increase breast cancer awareness are boundless. When volunteers bring their ideas to life, West Virginia women benefit. The WVBCCSP wants to thank all those who participated in activities this year.





During October 2009, volunteers raised over \$84,000 for the WV Breast and Cervical Cancer Diagnostic and Treatment Fund.



Bonnie's Bus Makes a Difference in West Virginia Communities

As Bonnie's Bus staff prepares to park the Bus for winter, others are reveling in the Bus's first year success. As of mid-December, the Bus had visited 22 of the 55 West Virginia counties. Some communities swamped the Bus with appointments and required an additional screening day, but what makes



Bonnie's Bus truly amazing is the 321 women (as of November 10, 2009) that received screening mammograms as a result. These women may not have been screened otherwise. By eliminating the transportation barrier to screening, more women gain access to necessary breast screening services.

The WVBCCSP has been the greatest payment source for women, with 130 women receiving their screening mammogram through the Program. However, other funding sources also support the Bus's services. One third (121) of the mammograms provided were paid for through private insurance while the remaining were paid through Medicare (53), Medicaid (10), and Komen (7). The latest

funding source to benefit Bonnie's Bus is the CASSIE Fund. As long as money is available, the Fund will pay for screening mammograms for women who are WVBCCSP eligible, but are 40 to 49 years of age and asymptomatic. Of the 321 women screened, 41 were referred for further diagnostic imaging.

Bonnie's Bus is off to a great start. You can help make it an even greater success by getting the word out. Help schedule a bus visit in your community by calling 1-877-287-2272 or request a visit through www.hsc.wvu.edu/mbrcc/bonnie/. Work closely with your regional WVBCCSP Cancer Information Specialist to prepare for the visit, and finally, encourage friends, families, and neighbors to schedule an appointment.

***Further breakdown of women screened on the bus.**

Mammograms and Age

30's	40's	50's	60's	70's	80's	TOTALS
15	89	116	76	17	8	321

Mammograms and Race/Ethnicity

Caucasian	African American	Hispanic / Latino	Asian American	Other	Total Number
314	6	0	1	0	321

February is Heart Health Month

Did you know . . .

United States:

- ◆ More than 80 million Americans have one or more forms of cardiovascular disease (CVD), including high blood pressure, coronary heart disease, stroke, congestive heart failure, and other conditions.
- ◆ 1 in 3 adult females have some form of cardiovascular disease.
- ◆ CVD will cost the nation an estimated \$475 billion in 2009, including health expenditures and lost productivity.
- ◆ In 2004*, 460,000 female lives were lost due to cardiovascular disease.
- ◆ In 2004*, more female lives were lost due to cardiovascular disease than by cancer, chronic lower respiratory disease, Alzheimer's disease, accidents, and diabetes combined.



West Virginia:

- ◆ The mortality rate for CVD in West Virginia is 344.5 per 100,000 residents (288.0 U.S.), making it the leading cause of death and a major cause of disability.
- ◆ Stroke, a condition that occurs when the blood supply to part of the brain is blocked or when a blood vessel bursts, affects 3.4% of West Virginians (as compared to the U.S. rate of 2.6%).
- ◆ The prevalence of stroke among West Virginia women was 4.1% during 2005 (2.6% U.S. females), giving West Virginia the fifth highest prevalence of stroke among BRFSS participants.
- ◆ According to the 2005 BRFSS, 31.9% of West Virginia women were told by their healthcare provider that they had high blood pressure (West Virginia has the second highest rate in the U.S.) and roughly 40.0% of West Virginia women have high cholesterol (34.2% U.S. females).

Research shows that heart disease and stroke are among the most widespread and costly health problems facing our nation today, but it also indicates that they are among the most preventable. According to CDC, cardiovascular diseases, specifically heart disease and stroke respectively, are the first and third leading causes of death for both men and women in the U.S. and account for nearly one-third of all American deaths. These diseases can be found and treated through health screenings for high blood pressure, high blood cholesterol, diabetes, and tobacco use. CDC reports that women at particularly high risk for these conditions are those who are uninsured and underinsured.

West Virginia WISEWOMAN is a program that can help change all that. Designed to provide critical screening and lifestyle intervention services, WISEWOMAN works closely with contracted screening providers to help support women to make changes that will: 1) improve their diets, 2) increase their physical activity level, and 3) help them stop smoking. New Year's is right around the corner and February is Heart Health Month, so there is no better time than the present to start making changes. Contact Sheryn Carey, WISEWOMAN Coordinator, at 1-800-642-8522 for more information on how you can become a WISEWOMAN provider.

Studies Show Women with Low Income Are at Greater Risk for Heart Disease & Stroke Because:

- ◆ They are more likely to smoke and to be overweight.
- ◆ They are less likely to be physically active and less aware of their blood pressure and blood cholesterol levels.
- ◆ They are more likely than women with high incomes to be uninsured or underinsured.
- ◆ They have less access to health care and are often unable to pay for needed prevention, screening, and treatment services.

*Last year that was reported by the Centers for Disease Control and Prevention (CDC).

Webster County Project Highlighted by the World Health Organization

The World Health Organization (WHO) recently published a compendium of primary care case studies regarding nursing and midwifery. An abstract describing the Webster County free women's health screening clinics was one of six United States' projects selected as a "best practice model" in this international publication. The abstract was submitted by Mountains of Hope member Wendy Grube, Associate Program Director of the Women's Healthcare Nurse Practitioner Program at the University of Pennsylvania's School of Nursing.

In 2007, Dr. Margaret Chan, the WHO Director-General called for "renewed emphasis on primary healthcare as an approach to strengthening health systems." The abstract showed the complex processes used by the Webster County Cancer Education Project partners to

raise funds to provide free breast and cervical cancer and other health screenings to women who live in poverty. The abstract was titled *Volunteer nurses fight cancer in a rural community*. Wendy stated that she is "thrilled to see this project as a part of a global effort involving nurses as we partner with communities to reduce healthcare inequities." The project is mentioned periodically throughout the compendium, but highlighted on pages 87 and 88.

The Webster County Cancer Education Project would like to thank Wendy for submitting the abstract to the World Health Organization and would like to extend its appreciation to all participating funders, including the West Virginia Breast and Cervical Cancer Screening Program and the Mountains of Hope Comprehensive Cancer Coalition.

Reminders:



- ◆ Central Finance has set up an e-mail account to receive inquiries regarding outstanding claims/invoices. Please ask providers to e-mail their claim information to dhrbphclaims@wv.gov and include phone and fax numbers in the e-mail. The e-mail account will be checked on a daily basis and will give us a better tracking mechanism for outstanding invoices.
- ◆ On the Diagnostic and Treatment Fund application, please fill out the Physician Submitting Section completely so the physician may receive a copy in a timely fashion.



Tracking and Follow-up Nurse Switches Positions

Cathy Payne, a former part-time Tracking and Follow-up Nurse of four years for the WVBC CSP, recently switched positions to a full-time Case Manager. Cathy hopes to broaden her knowledge of this Program and communicate with women from diagnosis through treatment.



Farewell to a Faithful WVBCCSNP Tracking and Follow-up Nurse

The WVBCCSNP would like to recognize Susan Watkins, Tracking and Follow-up Nurse, for her decade-long commitment to the Program. Susan recently retired from a position she loved and cherished. She began her association with the WVBCCSNP as a volunteer in 1991 with the Breast Cancer Coalition where she served one year as the chairman.

Born and raised in Fairmont, WV, Susan graduated from the WVU School of Nursing in 1964 with a B.S. degree and in 1986 with an M.S. degree, with a specialty in primary care and women's health. She is a breast cancer survivor of 22 years and has been very active in working with women and the early detection of breast cancer. She spent time as a Reach to Recovery volunteer for the American Cancer Society and helped train volunteers all over the state. Prior to her position with the WVBCCSNP, while working at CAMC, she received the *Local Hero* award where she got to put her name on a BMW.

Susan and her late husband had three daughters and five grandchildren. Although she is glad to be retired, Susan does miss work. However, she hopes that her newly open schedule will allow more time with her family and volunteering: she is a parish nurse at First Presbyterian in Charleston, WV. The WVBCCSNP would like to wish Susan well and thank her for her contributions to the Program.

Meet the New WISEWOMAN Coordinator



After a long-standing and stressful program vacancy, a new staff member is finally taking over the reigns as WISEWOMAN Coordinator. Sheryn Carey joins WISEWOMAN with an extensive resumé related to management, program coordination, strategic planning, and research and evaluation. Her most recent professional experience includes her position as a Health and Human Resources Specialist in the Office of Minority Health at the Department of Health and Human Resources in Charleston, WV.

Other work related experience includes consulting services as an independent contractor (i.e. grant writing, outreach and recruitment, event planning) and supportive services with the Covenant House in Charleston. Her educational background includes a Bachelor of Arts in Government from Oberlin College in Oberlin, Ohio, and 80 semester hours completed at the West Virginia University College of Law.

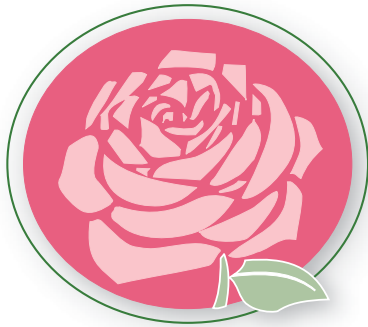
Sheryn brings a great deal of experience and perspective to the WISEWOMAN program. She hopes to bridge any gaps that might impede or inhibit communication and/or service delivery to the many women who can benefit from West Virginia WISEWOMAN. She also hopes to help the Program fulfill all of its potential to positively impact the lives in women throughout West Virginia. Staff knows she will be a great addition in helping the program move forward and would like to welcome Sheryn to the team.

Likes:

Each of the Four Seasons
 Friendly Folks
 Learning New Things
 Live Performances
 Textures

Dislikes:

Apathy
 Lengthy Power Outages
 Mean-Spiritedness
 Negativity
 Snakes



WEST VIRGINIA
Breast & Cervical
CANCER SCREENING PROGRAM

You're Worth It

You're Worth It . . .

This newsletter is for providers participating in the WVBCCSP. If you would like to contribute information or article ideas for this newsletter, please contact:

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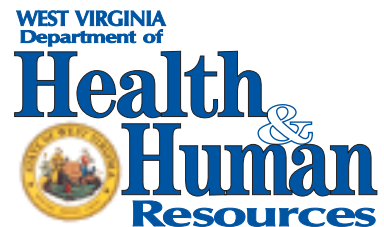
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