

WVBCCSP PROVIDER PRESS

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DIRECTOR'S DIALOG

By: Nikki Lyttle

Wow, this past year has gone by so quickly and with it has brought a sea of change. Change is not something that a lot of people welcome, but sometimes it is needed and gives us the opportunity to hit the restart button. Change is what you make of it. Even those team members who we've said goodbye to over the past twelve months through retirement and new opportunities have taken on change and we hope they've had a positive experience with it. Now as a program, CDC has asked us to change and as a team we've decided to embrace that and hit the restart button.

To me, reinvention is an exciting concept. We get the chance to think outside the box and push ourselves to try new things. We get to leave behind the status quo and open ourselves to greater opportunity and with any luck, find ourselves stronger and better for it. Reinvention doesn't mean we leave the past behind. What it means is that we build on the past, learn from it and take with us the good parts while never forgetting the bad and dooming ourselves to repeat the same mistakes. The past is what gives us the foundation to move forward into the future and positions us to become the best we can be.

So how are we changing? First, we have taken the steps to fully integrate the WVBCCSP and WISEWOMAN programs. Does this mean that all WVBCCSP providers will now offer WISEWOMAN? No. We are still unable to expand WISEWOMAN statewide due to funding limitations, but we are learning from each other, building our initiatives so that they are beneficial to both programs, and tapping into each other's strengths. You will notice our focus has expanded. We will be talking more about evidence-based interventions, population-based outreach, policy and health systems change, hubs, and patient navigation. Does this mean that we will forget screening services, which are the heart of what we do? No, without our heart we die. Providing services to women in need will remain the core of the program. We will continue to do what we do best – screen women and save lives.

Author C. Joybell C. said, "We can't be afraid of change. You may feel very secure in the pond that you are in, but if you never venture out of it, you will never know that there is such a thing as an ocean, a sea. Holding onto something that is good for you now, may be the very reason why you don't have something better." Let's find our "something better". Together we are stronger. Together we are smarter. Together we are unstoppable. Together we have the power to help West Virginia women live longer, happier, and healthier lives. The tide is coming in and it's our turn to catch the big wave.



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Policy for Mammograms

The West Virginia Breast and Cervical Screening Program (WVBCCSP) has not changed its policies for reimbursement of mammograms. The WVBCCSP will continue reimbursing for mammograms as described below unless our funder, the Centers for Disease Control and Prevention (CDC), informs us otherwise. If this happens the WVBCCSP will notify providers immediately.

The WVBCCSP will continue to reimburse an annual screening mammogram for all women 50-64 years of age who meet the eligibility requirements, are enrolled in the Program, and are referred by a WVBCCSP screening provider to a contracted mammogram provider.

Women aged 40-49 years are eligible for a screening mammogram if they have at least one of the following high-risk factors for breast cancer:

- Previous history of breast cancer
- Family history of breast cancer
- Never had children
- First child born after age 30
- Abnormal biopsy report
- Adopted and family history unknown

Dense breasts are not considered a high-risk factor for breast cancer or an abnormal finding.

There is a section on the Patient Data Form (PDF) to document high-risk factors for breast cancer. You may also write the woman's breast cancer risk factor(s) on the Referral Form. This way the mammography facility and radiologists are also made aware of her risk factors.

A woman under the age of 40 is never eligible for a WVBCCSP funded screening mammogram.

The Program will reimburse a diagnostic mammogram for an enrolled woman who has an abnormal Clinical Breast Exam (CBE). These abnormal results include:

- Bloody/serous nipple discharge
- Discrete Palpable Mass (Suspicious for cancer)
- Nipple/Areolar Scaliness
- Skin dimpling or retraction

To make it easier to remember, the above CBE results are marked with an asterisk (*) and highlighted in grey on the Patient Data Form. **The most important thing for providers to understand is if they select one of the above abnormal CBE results, the woman needs to be referred to a contracted breast surgeon regardless of the mammogram or breast ultrasound results.** Not all breast cancers are found on a mammogram. Diagnostic mammograms are reimbursed if the result of the screening mammogram is BIRADS 0, the radiologist requests additional imaging, or as a six-month follow-up. Breast ultrasounds are only reimbursed after a woman has a screening or diagnostic mammogram completed in the month preceding the ultrasound. The Program NEVER reimburses for breast MRI.

WISEWOMAN Forms and Policy Reminders

WISEWOMAN is in a supplemental year of funding which means we are wrapping up this iteration of the program. There have been a few changes to the forms that make it a bit easier to capture the data required by the CDC. New forms are currently being printed and they will be distributed when they become available.

The biggest policy change for WISEWOMAN began on July 1, 2017. WISEWOMAN provider sites were granted permission to navigate women with Medicaid, in addition to underinsured women, into the program. This service assures that women who once received their screening services through the WVBCCSP will continue to access care for women's health. At the same time, these women will now have access to WISEWOMAN which is focused on decreasing cardiovascular risk factors through lifestyle change.

This change has allowed one provider to enroll nine to ten women per day into the WISEWOMAN program! Not only are they providing needed services to their clients, but they are financially supporting the clinic in these challenging times. That is a win for everyone.

A reminder to our WISEWOMAN providers: you must include lab values when you submit a Screening Form. If the participant has Medicaid or other insurance, WISEWOMAN cannot pay for that initial lab. The other method of coverage is to bill the client for the lab fees. Also, if she is a navigation client, you may look back 90 days for lab results and submit those results with the Screening Form.

SAVE THE DATE!

PHNPAT/PHNPAT REFRESHER

March 21-23, 2018

The West Virginia Breast and Cervical Cancer Screening Program is offering the Public Health Nurses Physical Assessment Training and combined Refresher Training (PHNPAT/PHNPATR) at Euro-Suites in Morgantown, WV.

Registration Information Coming Soon.



Volunteers display the Wetzel County Quilt of Hope at the Hundred Burton Walk for Women.

Frequently Asked Questions (FAQs)

I have a patient who needs a breast ultrasound. When is it appropriate to refer a woman for this?

- Breast ultrasound will only be approved for reimbursement when it is used as an adjunct to a mammogram (not as a stand-alone diagnostic tool).
- WVBCCSP never reimburses for any other type of ultrasound.
- WVBCCSP does not reimburse for a three-month repeat breast ultrasound.
- If a six-month repeat breast ultrasound is requested, reimbursement can only be rendered if a six-month repeat mammogram is also completed.

The clinician documented the patient's CBE result as Discrete Palpable Mass: Suspicious of cancer. What do I do next?

The WVBCCSP requires a diagnostic mammogram and ultrasound as well as a breast surgical consultation referral, regardless of the mammogram/US result. The Program will reimburse up to two surgical consults per breast problem per year.

Remember, if the CBE result is **Discrete Palpable Mass: Dx benign**, the WVBCCSP does not reimburse for a breast surgical consultation referral or diagnostic mammogram/ultrasound. It is a benign finding.

When do I bill a patient's visit as a Referral for Enrollment?

To enroll a woman using the **Referral for Enrollment** visit type, the client should be from an outside provider (i.e. Family Planning provider or private physician's office) and must be referred for:

- Diagnostic mammogram
- Breast ultrasound after abnormal mammogram that was not paid by WVBCCSP
- Breast surgeon consultation
- Breast biopsy
- Colposcopy

The client must also meet WVBCCSP eligibility guidelines.

I need a Diagnostic and Treatment Fund form. Can you send one to me?

We can, but all WVBCCSP forms are available on the WVBCCSP website:
<http://www.wvdhhr.org/bccsp/>

Select Provider Information in the left-hand column, then select Forms from the dropdown list.



WVBCCSP PROVIDER TRAINING DATES FOR 2018

- January 18, 2018
- February 15, 2018
- March 15, 2018
- April 19, 2018
- May - NO TRAINING SCHEDULED IN MAY
- June 21, 2018
- July 19, 2018
- August 16, 2018
- September 20, 2018
- October 18, 2018
- November 15, 2018
- December 20, 2018

Anyone interested in attending the trainings must pre-register by contacting:

Joni Bella-Craddock, RN

WVBCCSP Nurse Case Manager

Phone: 304-356-4414

Email: Joni.L.Craddock@wv.gov

Trainings are conducted at the WVBCCSP office located at:
350 Capitol Street, Room 427,
Charleston, WV 25301



Providers from around the state participated in Women's Screening Clinics, Wear Pink Days, and other Breast Cancer Awareness Month celebrations.



Breast Cancer Awareness Month Activities 2017

By: Shelly Dusic

Volunteers across West Virginia coordinated and participated in over 139 Breast Cancer Awareness Month (BCAM) activities and events. Working at the grassroots level, volunteers are essential to the West Virginia Breast and Cervical Cancer Screening Program's efforts to educate women about the importance of cancer screening and early detection, to meet federal match requirements, and to help raise funds for diagnostic and treatment services.

Wood County Community Educational Outreach Service (CEOS) in Parkersburg kicked off BCAM on September 12th with a BCAM Luncheon. Attendees wore pink, learned about breast cancer, honored survivors, mourned those who passed, and celebrated opportunities to help others access screening.

Faith-based communities supported BCAM, hosting 12 Pink Ribbon Sunday events. Municipalities, County Commissions, post offices, and libraries coordinated 66 additional events that involved reading proclamations, hanging wreaths, sponsoring survivor luncheons, and promoting 'Pinkout' sporting events.



Pink Day at Emmanuel Assembly of God, Upper Glade, WV.

Increasing understanding about breast cancer screening and prevention are important goals of BCAM. Volunteers created 42 educational displays that ranged from Bras Across the Bridge, pink pumpkins, painting the town pink with flyers, and using pink bows. These pink symbols remind women to get screened for breast cancer. They stand as symbols of hope and support for breast cancer survivors and they reduce the taboo of talking about breast health. These displays allow Mountain State volunteers to showcase their creativity while reminding women they are worth taking care of themselves.



A volunteer shows his support with a pink beard at the Webster County Health Fair.



Think Pink Luncheon
Wheeling, WV.



Participants of all ages take part in the Monroe County 5K run.

Some events around the state serve as fundraisers for the WV Diagnostic and Treatment Fund (D&T Fund). The D&T Fund provides financial assistance to eligible women in need of certain breast and cervical cancer diagnostic or treatment services. This year, eight Walks for Women raised money for the D&T Fund. Other fundraisers included 5K runs, purse auctions, 'tagged car' events, luncheons, and dinners. Together, these volunteer-coordinated events raised a total of \$74,000 for the D&T fund.

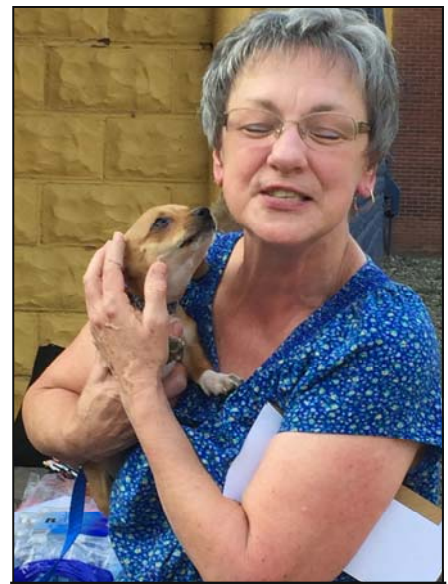
Breast Cancer Awareness Month is ultimately about women getting screened. WVBCCSP clinics sponsored ten screening events, often in partnership with the Bonnie's Bus Mobile Mammography Program. These events identified women in the community in need of screening and connected them with a WVBCCSP clinic. In October, a total of 157 women completed screening through these events. And yes, that is what BCAM is all about.



The Mason Dixon Rifle Club hosted a pink Shootout fundraiser in Monongalia County, WV.



Health Access and Bonnie's Bus host a Women's Screening Clinic in Clarksburg, WV.



Cujo offers encouragement at the Walk for Women in Hundred, WV.

Healthy Recipe: Slimmed Down Chicken Pot Pie

By: Barbara Miller

With cold weather and the holidays approaching, menu planning includes comfort foods, many of which are traditional recipes with high caloric value and fat, offering a high satiety value while clogging arteries. However, they taste so good! A common practice is using leftovers to create family favorite meals. In this pot pie recipe calories, fats, and sodium content are decreased by substituting a few ingredients without decreasing the taste.

A traditional Chicken Pot Pie has about 560 calories per serving, 24 grams of fat, 56 mg of cholesterol, and 889mg of sodium! This version significantly reduces those numbers simply by making a few substitutions in the types of fats used, monitoring the sources of sodium, adding extra vegetables and using white meat chicken. These changes make this comfort food a smarter choice.



Nutritional Information

- **Calories 388**
- **Fat 1 g**
- **Cholesterol 34 mg**
- **Sodium 650 mg**

Ingredients

- 3 cups of cooked boneless, skinless chicken breast
- 3 tablespoons of olive oil
- 1 cup chopped onion
- 1 cup chopped carrot
- 1 cup chopped celery
- 1 ½ cup frozen or canned peas
- 1 cup diced baking potato
- 1 ½ cups non-fat milk
- 3 cups non-fat, low sodium chicken broth
- 2/3 cup of flour
- ¼ cup fresh parsley chopped
- ¼ teaspoon dried thyme
- 2 sheets of puff pastry
- 1 teaspoon rubbed sage
- ¾ teaspoon salt
- 1 teaspoon white pepper

Directions

After removing all skin and visible fat, cook the chicken by poaching in water with no salt. Pre-heat the oven to 400 degrees.

Heat 3 tablespoons of oil in a large sauce pan over medium heat. Add the vegetables except for the peas, occasionally stirring, until the carrots are crisp-tender (about 8-10 minutes). Add 3 cups of chicken broth, chicken, herbs, seasonings, and peas. Cover, reduce heat to simmering and cook until vegetables are tender. In a separate container whisk the flour into the milk forming a slurry. Slowly add this mixture to the vegetable mixture stirring constantly until thickened. Remove from heat and place into a 9x12 casserole dish that has been sprayed with a fat free cooking spray.

Sprinkle a work surface with about 1 tablespoon of flour and roll each sheet of puff pastry to 13x9 rectangle. Place dough over the chicken mixture, pressing to seal the edges of the dish. Cut slits in the dough to vent. Spray the pastry with cooking spray. Bake for about 15 minutes or until the pastry is golden.

WVBCCSP Announces Staff Changes



The West Virginia Breast and Cervical Cancer Screening Program (WVBCCSP) announces several changes in staffing since August 2017. Most notably is that Nikki Lyttle is the new Director of the WVBCCSP and WISEWOMAN programs. Effective October 28th, Nikki brings 16 years of public health experience to her new position. Prior to becoming the Director, Nikki served as the WVBCCSP Epidemiologist since February 2002. She received both her BS and MS degrees in Biological Sciences from Marshall University. She is married and has a ten year old son and a four year old daughter. She enjoys travelling (Seattle and Ireland are some of her top picks), spending time with her family, cooking, baking, reading, and napping. Nikki is also an animal lover and has two dogs and a cat.



Ashley Whitney-Cassis previously served WVBCCSP as Medicaid Nurse Case Manager. In October 2016, Ashley became the Interim Nurse Supervisor. She has over ten years of nursing experience with a BS degree in Nursing from WVU and an Associate of Applied Science in Nursing degree from WVU-Parkersburg. She enjoys spending time with her husband and their two-year-old daughter and is anxiously awaiting the arrival of her son in February.



Susan Eason joins the WVBCCSP as the Community Clinic Interventionist Supervisor and will work to increasing population-based breast and cervical cancer screenings in the primary care setting. With two and a half years of experience as the Program Coordinator of the West Virginia Program to Increase Colorectal Cancer Screening, she brings knowledge and skills on how to support clinics as they implement evidence-based interventions proven to increase cancer screenings. Her prior work has included diabetes and depression research studying counseling and exercise interventions, cancer prevention research, and studying exercise and nutrition interventions in faith communities. She holds a BA in Psychology from the University of Virginia and a MA in Education from the Presbyterian School of Christian Education. She lives in Morgantown with her husband and two children and is an avid hiker, camper, sports enthusiastic, traveler and photographer.

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Please welcome these three staff members to their new roles and leadership responsibilities with the WVBCCSP.

In recent months, the WVBCCSP has also said goodbye to some staff. Stacy Tressler, Education Coordinator, left her position to pursue a doctorate degree in Epidemiology at the WVU School of Public Health. Vickie Burke, Education and Outreach Coordinator, moved to assume the position of Program Coordinator for the Bonnie's Bus Program at the WVU Cancer Institute. Thanks and appreciation go out to Stacy and Vickie for their dedication and commitment to the program. We wish them best of luck on their future endeavors.



WVBCCSP contracted with grocery stores around the state to do cart promotions. Have you seen us in your neighborhood?



Remember:

January is Cervical Health Awareness Month. What will you do to increase cervical screening in your community?



This newsletter is for providers participating in the WVBCCSP and WISEWOMAN programs. If you would like to contribute information or article ideas for the next edition of the *Provider Press*, please

**contact: Shelly Dusic, Editor
Policy and Environmental Change
Community-Clinic Linkage Specialist**

sdusic@hsc.wvu.edu

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