



**Every Woman Counts  
Second Quarterly Expenditure and Caseload  
Report to the Legislature for  
Fiscal Year 2016-17**

**California Department of Health Care Services  
Benefits Division**

**Every Woman Counts  
Breast and Cervical Cancer Screening Services**

Health and Safety Code Section 104151(b) states “*The Department of Health Care Services (DHCS) shall provide the fiscal and appropriate policy committees of the Legislature with quarterly updates on caseload, estimated expenditures, and related program monitoring data for the Every Woman Counts (EWC) Program. The updates shall be provided no later than November 30, February 28, May 31, and August 31, of each year.*”

This second quarterly report includes Fiscal Year (FY) 2016-17, program data, updates on caseload, and estimated expenditures for the period July 1, 2016, through December 31, 2016.

### **EWC Caseload**

The second quarter observed caseload <sup>1</sup> was 77,846 women. The observed caseload is cumulative since July 1, 2016.

### **Estimated Expenditures through Second Quarter of FY 2016-17**

<b>Related Program Monitoring Data: Type of Claim</b>	<b>Total Claims</b>	<b>Total \$ Paid*</b>
Office Visits and Consults	60,038	\$1,771,401.18
Screening Mammograms	45,977	\$4,736,569.99
Diagnostic Mammograms	17,076	\$1,351,880.66
Diagnostic Breast Procedures	4,862	\$180,342.89
Other Clinical Services <sup>2</sup>	41,292	\$1,869,327.01
Case Management <sup>3</sup>	4,504	\$225,150.01
<b>Grand Total</b>	<b>173,749</b>	<b>\$10,134,671.74</b>

**Note:** This summary includes data for paid claims for breast and cervical cancer screening services, however, does not include data for denied claims. \*The data presented in this chart is limited to claims invoiced for services provided from July 1, 2016, through December 31, 2016, adjudicated as of January 23, 2017. Some services rendered during this period have not been invoiced or paid; therefore, the reported data cannot be compared to data provided through other formal processes (Budget Estimates).

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<sup>1</sup> Caseload is defined as the sum of program recipients, by unique client identification number, who received at least one paid service during reporting period.

<sup>2</sup> Includes cervical screening and diagnostic services, and pathology procedures for both the breast and cervical cancer screening programs.

<sup>3</sup> Case management is paid at \$0 for normal screening results and \$50 for abnormal screening results. The policy for \$0/\$50 has been implemented in the claims payment system.

**Current Expenditures for FY 2015-16**

<b>Related Program Monitoring Data: Type of Claim</b>	<b>Total Claims</b>	<b>Total \$ Paid*</b>
Office Visits and Consults	144,055	\$4,297,501.05
Screening Mammograms	147,043	\$12,571,846.49
Diagnostic Mammograms	43,478	\$3,274,432.77
Diagnostic Breast Procedures	21,423	\$780,000.77
Other Clinical Services <sup>4</sup>	95,131	\$4,076,006.45
Case Managements <sup>5</sup>	12,443	\$615,724.51
<b>Grand Total</b>	<b>463,573</b>	<b>\$25,615,512.04</b>

**Note:** This summary includes data for paid claims for breast and cervical cancer screening services; however, does not include data for denied claims. \*The data presented in this chart is limited to claims with dates of service from July 1, 2015, through June 30, 2016, adjudicated as of January 23, 2017. Some services rendered during this period have not yet been invoiced, or paid; therefore, this reported data cannot be compared to data provided through other formal processes (Budget Estimates).

**EWC Activities for the Second Quarter of FY 2016-17**

Assembly Bill 49 (Buchanan, Chapter 351, Statutes of 2014) allows EWC to work with the Pink Plate campaign founders, Department of Motor Vehicles (DMV), and California Highway Patrol to bring the Pink Ribbon License Plate to California. DHCS must have a minimum of 7,500 pre-paid orders within a 12-month period before California DMV will manufacture the Pink Ribbon License Plate. As of February 15, 2017, DHCS has received 6985 pre-paid license plate orders.

The Centers for Disease Control and Prevention (CDC), Division of Cancer Prevention and Control released a new Funding Opportunity Announcement (FOA) for the period of June 30, 2017, through June 29, 2022. This FOA supports implementation of a comprehensive and coordinated approach to inform policy, systems, and environmental change strategies to prevent and control cancer. It supports high quality breast and cervical cancer screening services, statewide cancer coalitions to plan and implement cancer control priorities, and surveillance programs to monitor and report cancer burden.

The current grant expires on June 29, 2017, and DHCS and the California Department of Public Health (CDPH) are the current grant recipients. This five-year grant will enable DHCS, as an awardee under the National Breast and Cervical Cancer Early Detection Program (NBCCEDP), to utilize continuing federal funds to support breast and cervical cancer services provided by EWC.

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<sup>4</sup> Includes cervical screening and diagnostic services, and pathology procedures for both breast and cervical cancer screening program.

<sup>5</sup> Case management is paid at \$0 for normal screening results and \$50 for abnormal screening results. The policy for \$0/\$50 has been implemented in the claims payment system.

A new NBCCEDP grant application was submitted on February 21, 2017. Awards are expected to be released on June 30, 2017. CDPH, as the principal investigator, submitted the grant application.

EWC Quarterly Reports to the Legislature are posted on line at DHCS website:  
<http://www.dhcs.ca.gov/services/cancer/EWC/Pages/EWCReports.aspx>