

**California Department of Public Health  
Every Woman Counts (EWC)**

**Summary Update to the Legislature  
Third Quarter FY 2011–12 Breast and Cervical Cancer Screening Services**

Section 169 of the Budget Act of 2010 Trailer Bill on Health (SB 853, Chapter 717, Statutes of 2010) states, “The State Department of Public Health shall provide the fiscal and appropriate policy committees of the Legislature with quarterly updates on caseload, estimated expenditures, and related program monitoring data and activities for the Every Woman Counts program.” These updates shall be provided no later than the 15th day of the month, following the end of each quarter of the fiscal year. These updates will be available on August 15, October 15, January 15, and April 15.

**Dates of Service: 7/1/11 – 3/31/12  
Data Extracted on 4/09/2012**

**Total Unique EWC Recipient ID numbers<sup>1</sup> 189,721**

**Estimated Expenditure for Quarter 3 of FY 2011-12 \$21,917,921.15**

<b>Related Program Monitoring Data: Type of Claim</b>	<b>Total Claims</b>	<b>Total \$ Paid*</b>
Office Visits and Consults	183,154	5,550,668.40
Screening Mammograms	143,639	7,497,427.58
Diagnostic Mammograms	46,236	2,416,756.63
Diagnostic Breast Procedures	69,202	3,266,706.10
Case Management <sup>2</sup>	88,043	2,654,597.44
Other Clinical Services <sup>3</sup>	19,180	531,765.00
	549,454	21,917,921.15

**Notes: This summary includes data for paid claims for breast and cervical cancer screening services only. The summary does not include data for denied claims.**

\* The data presented is limited to claims paid for services provided between 7/1/2011 - 3/31/2012 and paid as of 4/09/2012 (date the report was generated). As some services rendered during this period have not yet been invoiced, or paid, this reported data cannot be compared to data provided through other formal processes (e.g., Budget Estimates).

<sup>1</sup> Total unique EWC Recipient ID numbers do not represent unique women or caseload, since a single woman can have multiple Recipient ID number in the current data system.

<sup>2</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.

<sup>3</sup> Includes cervical screening and diagnostic services, and pathology procedures for both breast and cervical.

Listed below are the EWC program activities for the 3<sup>rd</sup> Quarter of FY 2011-12:

- EWC is working with the Department of Health Care Services to facilitate transition of EWC and other direct services programs (Prostate Cancer Treatment Program) to DHCS effective July 1, 2012 as proposed in the 2012 Governor's Budget that was released January 5, 2012.
- On February 23, 2012, EWC met with Stakeholders from the American Cancer Society, Susan G. Komen for the Cure, the American College of Obstetrics and Gynecology, and the California Medical Association. The agenda included a discussion about EWC's projected expenditures reported in the 2012 Governor's Budget and EWC's transition to DHCS.
- The Centers for Disease Control and Prevention has informed EWC that new cervical cancer screening guidelines will be released in the near future for the National Breast and Cervical Cancer Early Detection Program (NBCCEDP), in which EWC participates. This new guidance is in response to new US Preventive Services Task Force (USPSTF) recommendations for cervical cancer screening released March 16, 2012. CDPH is not making any changes to EWC until new guidelines for the program are released from CDC. The USPSTF recommendations include:
  - No Pap smear before age 21 or after 65
  - Pap smear every 3 years for women age 21–29
  - Pap smear every 3 years for women age 30-65 or Pap smear with HPV testing every 5 years

These recommendations do not apply to women at high risk for cervical cancer. For further information, please go to the following website: <http://www.uspreventiveservicestaskforce.org/uspstf/uspscerv.htm>

- EWC is preparing to host a Regional Contractor (RC) meeting on May 30-31, 2012, in Sacramento. RCs maintain and assure quality of the provider network and provide public education to priority populations on breast and cervical cancer early detection as well as eligibility information for EWC.

Meeting objectives:

1. Provide an update on the EWC transition to DHCS by representatives from the CDPH and DHCS Transition Steering Committee.
2. Provide RC staff with updates on breast and cervical cancer epidemiology, strategies to decrease disparities in priority populations, quality improvement, including patient navigation, changes that may impact EWC, such as health care reform and the low income health plan initiative.

3. Discuss RC responsibilities regarding outreach to priority populations, promotion and facilitation of breast and cervical cancer early detection, and maintenance of a high quality provider network.

**EWC Quarterly Reports are available on the CDPH website at:**

**<http://www.cdph.ca.gov/programs/CancerDetection/Pages/EWCReports.aspx>**