

# Every Woman Counts Expenditure and Caseload Second Biannual Report to the Legislature Fiscal Year 2017-18

## California Department of Health Care Services Benefits Division

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

Senate Bill 97, Committee on Budget and Fiscal Review, Chapter 52, Statutes of 2017, amended Health and Safety Code Section 104151(b) which states:

...each year the State Department of Health Care Services (DHCS) shall provide the fiscal and appropriate policy committees of the Legislature with biannual updates on caseload, estimated expenditures, and related program monitoring data for the Every Woman Counts (EWC) Program. These updates shall be provided no later than February 28 and August 31 of each year. The purpose of the updates is to provide the Legislature with the most recent information on the program, and shall include a breakdown of expenditures for each six-month period for clinical service activities, including, but not limited to, office visits and consults, screening mammograms, diagnostic mammograms, diagnostic breast procedures, case management, and other clinical services.

This biannual report includes Fiscal Year (FY) 2017-18, program data, updates on caseload, and estimated expenditures for the period of July 1, 2017, through June 30, 2018.

#### **EWC Caseload**

**Grand Total** 

The second biannual observed caseload<sup>1</sup> was 159,438 women. The observed caseload is cumulative since July 1, 2017.

#### Related Program Monitoring Data: Total Claims Total \$ Paid\* Type of Claim Office Visits and Consults 153,184 \$4,506,066.12 Screening Mammograms 69,910 \$6,830,542.65 Diagnostic Mammograms 23.297 \$1,980,566.74 Diagnostic Breast Procedures 14,036 \$525,027.16 Other Clinical Services<sup>2</sup> 214,505 \$14,459,474.47 15,422 Case Management3 \$768,681.81

490,354

\$29,070,358.95

#### **Actual Expenditures for FY 2017-18**

**Note**: This summary includes data for paid claims for breast and cervical cancer screening services, however, it does not include data for denied claims.

\*The data presented in this chart is limited to claims invoiced for services provided from July 1, 2017, through June 30, 2018, adjudicated as of July 30, 2018. Therefore, the reported claims data does not represent the total expenditures for this period and cannot be compared to data provided through other formal processes (Budget Estimates).

<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> Other Clinical Services include 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 2016-17**

| Related Program Monitoring Data: Type of Claim | Total Claims | Total \$ Paid*  |
|--|--------------|-----------------|
| Office Visits and Consults                     | 145,492      | \$4,276,113.59  |
| Screening Mammograms                           | 123,563      | \$11,798,183.95 |
| Diagnostic Mammograms                          | 41,614       | \$3,284,114.75  |
| Diagnostic Breast Procedures                   | 12,466       | \$443,032.15    |
| Other Clinical Services                        | 162,189      | \$5,609,017.74  |
| Case Management                                | 12,819       | \$632,781.33    |
| Grand Total                                    | 498,143      | \$26,043,243.51 |

**Note**: This summary includes data for paid claims for breast and cervical cancer screening services; however, it does not include data for denied claims.

\*The data presented in this chart is limited to claims with dates of service from July 1, 2016, through June 30, 2017, adjudicated as of July 30, 2018. 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 this second biannual report for FY 2017-18 January 1 – June 30, 2018:

#### California Pink Ribbon License Plate:

As of June 30, 2018, the Department of Motor Vehicles (DMV) issued 7,691 breast cancer awareness special interest license plates, 29 of which were motorcycle license plates. The motorcycle plates are one of two full colored background special interest license plates, typically the plates consist of just a simple decal affixed to a white license plate. Revenue generated from the breast cancer awareness special interest license plates will provide early breast cancer detection services to uninsured and underinsured women, raise breast cancer awareness and prevention efforts.

#### **EWC Health Education and Communications:**

In February 2018, the EWC Program utilized a non-traditional partnership with the Motor Vehicle Network, which displays advertisements on video terminals located in DMV offices. EWC developed a 30-second ad that included information about EWC services, eligibility criteria, and the risks of breast and cervical cancer. Ads ran over a four month period. EWC targeted DMV offices that resided in locations with high incidence rates of advanced breast and cervical cancer. Individuals were surveyed about the EWC ads, at tables assembled outside the DMV offices. Survey results indicated 86 percent of individuals who viewed the ads acknowledged that EWC offers free breast and cervical cancer screenings, and that services are available to those

who meet EWC's eligibility criteria. Eighty percent of individuals surveyed indicated they planned to get screened for breast and/or cervical cancer.

Health Educators (HE) and Community Health Workers (CHW) conducted 177 health education classes, reaching out to over 1,489 people throughout California. In addition, HE and CHW attended 138 community events, reaching over 2,882 attendees that included rural/indigenous, American Indians, Asian/Pacific Islanders, African American, refugees, and the general population.

EWC Bi-annual Reports to the Legislature are posted on line at DHCS website: http://www.dhcs.ca.gov/formsandpubs/Pages/Reports2thelegislature20182019.aspx