

**EVERY WOMAN COUNTS
EXPENDITURE AND CASELOAD
BIANNUAL REPORT TO THE
LEGISLATURE
JANUARY 1 – JUNE 30, 2024**

BACKGROUND

The California Department of Health Care Services (DHCS) administers the federal Centers for Disease Control and Prevention, National Breast and Cervical Cancer Early Detection Program, and California's Breast Cancer Control Program cooperative agreement known as the Every Woman Counts (EWC) Program. EWC provides free breast and cervical cancer screening and diagnostic services, with referral to treatment, to California's underserved populations. The mission of the EWC Program is to mitigate the devastating medical, emotional, and financial effects of breast and cervical cancer by eliminating health disparities for medically underserved, low-income individuals.

This EWC First Biannual Report for 2024 (Report) complies with Health and Safety Code Section 104151, which requires DHCS to provide biannual updates, no later than February 28 and August 31 of each year, to the fiscal and appropriate policy committees of the Legislature. This Report includes the most recent program information, for a six-month period, on clinical service activities, caseload, and summarizes expenditures. The data available in this Report includes clinical claims and expenditures for office visits and consultations, screening mammograms, diagnostic mammograms, diagnostic breast procedures, magnetic resonance imaging, cervical screening, diagnostic services, case management, and other clinical services. During this reporting period, January 1 through June 30, 2024, the program did experience a decline in caseload, clinical claims, and expenditures.

CASELOAD

This Report to the Legislature includes Fiscal Year (FY) 2023-24 data on caseload. EWC providers are required to submit clinical claims within six months following the month in which the services were rendered. Beginning in January 2024, Senate Bill 184 (Committee on Budget and Fiscal Review, Chapter 47, Statutes of 2022) allowed individuals between the ages of 26-49 with unsatisfactory immigration status to be eligible to receive full scope Medi-Cal benefits. This impacted the EWC Program's caseload, clinical claims, and expenditures.

EWC Observed Caseload ^[1] was 39,287 individuals from January 1 through June 30, 2024. EWC experienced a caseload decrease of 41.7 percent, compared to the caseload (67,371 individuals) for the same period last fiscal year (January 1 through June 30, 2023).

EWC Actual Clinical Claims and Expenditures (Table 1) were \$7,367,906 from January 1 through June 30, 2024, which represents a 38.4 percent decrease in total expenditures

¹ Caseload is defined as the number of EWC individuals, designated by a unique identification number, who received at least one paid service during the reporting period.

when compared to the expenditures (\$11,956,826) for the same period last fiscal year (January 1 through June 30, 2023).

EWC was appropriated \$33.2 million for FY 2023-24, as reported in the November 2023 Family Health Local Assistance Estimate, which is available on the DHCS website:

[November 2023 Family Health Local Assistance Estimate](#).

Table 1: EWC Program Actual Clinical Claims and Expenditures

For Dates of Service: January 1 through June 30, 2024

Type of Claim	Total Claims	Total Amount Paid*
Office Visits, Consultations, and Telehealth	31,699	\$ 1,224,257
Screening Mammograms	34,307	\$ 2,558,812
Diagnostic Mammograms ^[2]	9,296	\$944,027
Diagnostic Breast Procedures ^[2]	20,350	\$1,779,133
Magnetic Resonance Imaging ^[2]	413	\$68,758
Cervical Screening and Diagnostic Services ^[3]	16,167	\$436,550
Other Clinical Services ^{[2] [4]}	4,668	\$221,231
Case Management ^[5]	2,709	\$135,138
Grand Total	119,609	\$7,367,906

***Note:** The data in the chart was extracted from the Management Information System/Decision Support System (MIS/DSS) as of January 31, 2025.

² Four categories (Diagnostic Mammograms, Diagnostic Breast Procedures, Magnetic Resonance Imaging, and Other Clinical Services) were updated to improve accuracy of the report.

³ Cervical Screening and Diagnostic Services were added as a new category to correctly depict the breakdown of EWC Program funding. Previously, these expenses were incorporated in the Other Category.

⁴ Other Clinical Services are pathology procedures for both breast and cervical cancer screenings.

⁵ Case Management is not reimbursable for normal screening results but is reimbursed at \$50 for abnormal screening results.

EWC Program Activities for July 1 through December 31, 2023

EWC PROGRAM OUTREACH AND EDUCATION

Health Educators (HEs) and Community Health Workers provided 454 classes during this reporting period, engaging 2,599 participants. The HEs prioritized relationships, raised breast and cervical cancer awareness, provided education, and supported eligible program recipients. They also collaborated with school districts, faith-based organizations, affordable housing complexes, libraries, and non-profit organizations who serve low-income, and immigrant families. Healthcare provider and partnership improvements helped increase program referrals and screening services among young program eligible demographics.

To effectively improve cancer awareness and program participation, initiatives, educational campaigns, webinars, and social media and other online platforms were utilized. Innovative communication strategies through community events and educational workshops were achieved, primarily targeting individuals ages 21 through 26 years old, who had never received cervical cancer screenings. Furthermore, EWC partnered with a Native American regional contractor to promote breast and cervical cancer awareness within the Native American and Alaskan Native communities. HEs were successful with the recruitment of new Community Health Workers who focused on the African American, Vietnamese, and LGBTQ populations to support new networking and partnerships opportunities.

EWC PROGRAM PROVIDERS, RECRUITMENT, AND NETWORK MAINTENANCE

As of June 30, 2024, EWC maintained a provider network of 1,130 Primary Care Providers (PCP) and EWC Clinical Coordinators (CCs) recruited 29 new and re-enrolled EWC PCPs. The EWC CCs provided training, orientation, and technical support to the PCPs and staff. Topics addressed included EWC policies and procedures, quality standards, and data submission requirements. During EWC PCP trainings efforts to improve data collection was emphasized.

Core Program Performance Indicators (CPPI) were developed by the Centers for Disease Control and Prevention and the National Breast and Cervical Cancer Early Detection Program. CPPIs summarize and organize data to evaluate quality and timeliness benchmarks, measuring from a final breast and/or cervical cancer diagnosis to the start of treatment. EWC continues to provide appropriate and timely breast and cervical cancer screening and diagnostic services and utilize monthly CPPIs to track and report individuals who are identified as an Incomplete Cycle, Lost to Follow-up, and/or Refuse Care.

EWC PROGRAM OVERSITE OF EVIDENCED-BASED INTERVENTIONS

EWC successfully collaborated with the California Department of Public Health, Comprehensive Cancer Control Program, California Colorectal Cancer Coalition, and California Dialogue on Cancer to implement evidenced-based interventions. A total of ten health care systems throughout California implemented targeted evidenced-based interventions activities to increase breast and colorectal cancer screening rates in clinics. These activities included improving patient reminder systems, organized screening events (mobile mammography units), and small media outreach campaigns. In addition, bi-monthly meetings with EWC staff, HEs, and CCs were held in clinics to address technical assistance. For continuous project improvement, interaction with the clinics enabled a productive colorectal cancer screening dialogue to discuss challenges and successes.

CALIFORNIA PINK RIBBON LICENSE PLATE

As of June 30, 2024, the DMV reported 5,559 breast cancer awareness special interest license plates currently in operation. Since its inception, Pink Plate has generated \$1,188,057.47 in total revenue (minus the costs of new plates and administration). All proceeds have been used to reimburse EWC providers for breast cancer screening and diagnostic services.



EWC Biannual Reports to the Legislature are available online on the DHCS website at the following link:

<https://www.dhcs.ca.gov/formsandpubs/Pages/Reports-to-the-Legislature.aspx>