



LADIES FIRST PROVIDER
newsgram
 TIMELY INFORMATION AS IT OCCURS FROM LADIES FIRST

WINTER
 2005/2006

From Screening to Treatment

When a woman is diagnosed with breast cancer or has an abnormal colposcopic biopsy and is in need of treatment, *please contact the Ladies First office as soon as possible.* Although Ladies First is not able to utilize program funding to pay for any treatment-related procedures, the program can help determine if the woman is eligible for the Breast and Cervical Cancer Prevention Treatment Act (BCCPTA). BCCPTA is a Medicaid program that provides treatment coverage (for eligible Ladies First members). Enrolling members into BCCPTA is a time-sensitive process; any delays can result in a member not having coverage for treatment-related services. **Notifying the Ladies First program allows us to provide proactive case management and to assist the member with the screening-to-treatment transition.**

We couldn't do it without you.
 Thanks for helping make the
 program so successful!

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Facts and Figures about Breast and Cervical Cancer Screening

Despite the availability of screening tests, deaths from breast and cervical cancer occur more frequently among women who are uninsured or under-insured. Mammography and Pap tests are underused by women who have less than a high school education, are older, live below the poverty level, or are members of certain racial and ethnic minority groups.¹ Ladies First is part of a national effort to increase access to mammography and Pap test screenings for women in need. The following table summarizes utilization of the program:²

¹ Centers for Disease Control and Prevention. *The National Breast and Cervical Cancer Early Detection Program 1991–2002 National Report.* Atlanta (GA): Department of Health and Human Services; 2005.

² Data Source: April 2005 submission of National Breast and Cervical Cancer Early Detection Program (NBCCEDP) Minimum Data Elements (MDE), <http://www.cdc.gov/cancer/nbccedp/sps/profiles/vermont.htm>.

WOMEN SERVED THROUGH LADIES FIRST
 Five-Year Summary, 7/1999 to 6/2004
 Vermont

| | |
|------------------------------------|--------------|
| Women Served* | 4,806 |
| Women Receiving Mammography | 3,244 |
| Women Receiving Pap tests | 3,410 |

Each category reports counts of unduplicated women receiving services within the 5-year period. Women may be counted in more than one category.

*Women Served includes women receiving any Ladies First funded screen or diagnostic procedure for breast or cervical cancer. These counts do not include pending or non-CDC funded results.

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Measuring up with Follow-up

Once women are served by screening, any abnormal results must be followed up quickly and completely. CDC's National Breast and Cervical Cancer Early Detection Program (NBCCEDP) sets *(continued on page 2)*

(continued from page 1)

standards for both cervical and breast cancer abnormal screening results. At least 90 percent of women must have their abnormal screening results followed-up completely, and 75 percent or more of cancer diagnoses must be made within 60 days of screening. **The care given to Vermont women served by the Ladies First program meets or exceeds all of the CDC standards.**

FOLLOW-UP RATES FOR ABNORMAL TEST RESULTS

| Performance Indicator | CDC Standard | Ladies First | Standard Met?* |
|--|--------------|--------------|----------------|
| Abnormal Cervical Cancer Screening Results with Complete Follow-Up | > 90% | 89% | YES |
| Abnormal Cervical Cancer Screening Results; Time from Screening to Diagnosis < 60 Days | > 75% | 86% | YES |
| Abnormal Breast Cancer Screening Results with Complete Follow-Up | > 90% | 97% | YES |
| Abnormal Breast Cancer Screening Results; Time from Screening to Diagnosis < 60 Days | > 75% | 97% | YES |

* A standard statistical test was used in determining if the program's performance met the CDC standard.

Don't Forget Our WISEWOMAN Program!

For members 40+, Ladies First pays for two cardiovascular-related office visits per year, and a host of heart-healthy patient education and awareness services are made available to participating members. Ladies First members receive a purple CVD screening card to bring to their office visit. Centers for Disease Control (CDC) policy governing this portion of the Ladies First program requires that an office visit consist of:

- ▶ Two blood pressure readings
- ▶ Total cholesterol
- ▶ Height
- ▶ Weight
- ▶ Smoking status
- ▶ Current medication information relating to cholesterol, blood pressure, and diabetes
- ▶ Lipid panel (optional covered test)
- ▶ Glucose (optional covered test)

Simply complete the CVD screening card with the required elements and forward to Ladies First. As a way to evaluate the effectiveness of the WISEWOMAN program, CDC requires re-screening within 10-14 months even though this time period may not follow traditional clinical recommendations.

Ladies First members who participate in the CVD screening also receive an invitation to participate in our heart-healthy *Lifestyle Intervention Program*. **This program includes information and assistance with nutrition, physical activity, weight loss and**

smoking cessation. The smoking cessation includes counseling and access to free lozenges, patches or gum. Women that participate also receive incentives such as cookbooks, a pedometer and more. To refer a screened patient please fill out a Ladies First Lifestyle Prescription Form located on the CVD screening card and/or have her contact Kate at 1-800-508-2222. Also, please be sure to forward the screening results to Ladies First.

Clinical Data Collection: We Need Your Help!

As part of the funding arrangement with the CDC Ladies First is required to report clinical findings (without individual identifiers) to CDC every six months. In order to meet this requirement (a con-

POP QUIZ!:: What are the most common missing clinical findings on screening forms submitted to Ladies First?

- A) Pap test report
- B) Mammogram results
- C) Height and weight
- D) 2nd blood pressure reading
- E) Cholesterol
- F) Current medications relating to diabetes, hypertension and cholesterol.
- G) ALL OF THE ABOVE!!!**

(Just in case you're wondering, the correct answer is "G.")

dition of funding) it is important that we receive screening report cards & clinical data from providers in a timely fashion. The program's preference is to have clinical screening data submitted to the Ladies First office within 10-15 days of the patients visit (or test result availability). Timely screening data also enables the Ladies First program an opportunity to initiate case management responsibilities (as outlined by CDC – see the Ladies First Resource Manual for more on this topic). We realize that circumstances arise that result in delays from time to time. However, any effort on your part to assist with this function is appreciated and will help us to operate more effectively.

Ladies First and Electronic Data Systems (EDS) Billing

In June 2005 Electronic Data Systems (EDS) and the Ladies First program held two training events. The training provided an overview of: the NEW billing system, procedures for submitting claims, procedures covered by Ladies First and their associated CPT and ICD-9 codes, the new Ladies First Resource Manual, as well as an opportunity to ask questions. The trainings were well attended and the EDS billing system went into effect July 1, 2005. Local Ladies First outreach specialists in every county continue to provide training and distribute resource manuals upon request. They also can assist providers who would like to enroll in the program, and will continue to work with providers in retrieving clinical data. For more information or to schedule training contact our provider support line at 1-800-510-2282.

Important Tips on Billing

1. Effective July 1, 2005: **Providers should be billing EDS** and not the Vermont Department of Health for services provided post July 1, 2005. For specific claim/billing questions offices may contact EDS at 1-800-925-1706 or 802-878-7871.
2. Please be sure to use your **“legal name”** when filing claims which is indicated on your Ladies First/EDS enrollment located on page 6, Attachment A, Section 1 Name.

3. Ladies First provider numbers start with the numbers **“800”**.
4. You will need to use your **Ladies First provider number** on Ladies First claims – your Medicaid number will not work.
5. The processing of a **Ladies First provider number** takes about one month. Providers may still bill EDS for Ladies First services provided after July 1, 2005 once they receive the **“800”** Ladies First provider number from EDS.
6. When filling out a HCFA 1500 claim form, the Ladies First Resource Manual states: **“If the member has other health insurance, enter the applicable policy number and additional information in Field Locator 11.”** Electronic Data Systems EDS has informed us that it is acceptable to note health insurance status in either **box 9 or box 11**.
7. For a current listing of Ladies First provider numbers you can visit **vtmedicaid.com** (click download, manuals and see Ladies First active providers), **LadiesFirstVt.org** (click on at top Health Care Professionals, scroll down to Provider Billing Numbers and click, then scroll down again to active provider list) or contact our Ladies First Provider Support Line at 1-800-510-2282 for assistance.
8. Please be sure patients are current Ladies First members prior to invoicing.

Wanted: Health Care Providers Rewards: Many

Ladies First is seeking individuals to assist with guiding the mission of saving lives through screening, early detection, health education and improved access to high-quality health care. You can do this by joining the Ladies First Professional Advisory Board. The Board works to help reduce the social, economic and individual impact of breast and cervical cancer and cardiovascular disease in women. Interested in participating on our statewide professional advisory board? The first step is easy. Contact the Provider Support line at 1-800-510-2282 and ask for **Marlys Beck, RN CVD Coordinator/Case Manager**.