



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

Family Health Administration

Donna Gugel, Acting Director

CCSC HO # 12-04

MEMORANDUM

To: Health Officers
CRF-CPEST Program Directors, Coordinators, and Staff
SAHC CRF Program Directors, Coordinators, and Staff

From: Ahmed Elmi, MPH, CHES, Program Health Educator
CRFP Unit, Center for Cancer Surveillance and Control

Date: January 13, 2012

Subject: **Teleconference on CRF Cancer Programs – Wednesday, January 18, 2012**

Attached is the agenda for the Teleconference on Wednesday, **January 18, 2012**, from 10:00 -12:00.

PLEASE GO SLOWLY AND FOLLOW THE PROMPTS

Dial in to the following “Meeting Place” dial in number: **410-225-5300**

Give the following **Meeting ID Number: 9339#**

When entering the Meeting ID Number, follow by the # sign.

If there are problems, we will send out an e-mail notifying you about what is happening and what the next steps will be, so please check your e-mail. If you have any trouble dialing into the audio-conference call, please contact DHMH Teleconference Services at (410) 767-5108. A staff member will assist you in your connection to the audio-conference. **Please turn your phone to MUTE** unless asking a question at the teleconference. You may connect into the conference call **as early as 9:55AM, NOT SOONER, PLEASE**

Attachments (E-mailed to Health Officers and CRF/CPEST Program Directors/Coordinators)

cc: Donna Gugel, M.H.S.
Courtney Lewis, M.P.H.
Sarah Hokenmaier
Diane Dwyer, M.D.
Barbara Andrews, M.S.Ed., R.D.
File

Cancer CRF Teleconference
DHMH Center for Cancer Surveillance and Control
Wednesday, January 18, 2012, 10:00-12:00 P.M.

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Agenda

FHA/CCSC Announcements:

Dave Long, FHA Deputy Director is retiring this month.

Kelly Sage is now the Acting FHA Deputy Director and will have oversight of CCSC.

Sarah Conolly Hokenmaier is the Acting CCSC Deputy Director.

1. Maryland Skin Cancer Prevention Program – Roberta Herbst

For more information or questions, please contact:

Roberta M. Herbst, M.S., Program Manager

Maryland Skin Cancer Prevention Program, Center for a Healthy Maryland

1211 Cathedral St., Baltimore, MD 21201

Phone: 410-539-0872 ext. 3340 or 800-492-1056, ext. 3340

Email: rherbst@medchi.org

2. Minority Outreach and Technical Assistant – Arlee Gist

For more information or questions, please contact:

Arlee Gist, Deputy Director, Minority Health and Health Disparities

Phone: 410-767-1052

Email: agist@dhhm.state.md.us

3. Maryland Cancer Fund Updates - Sandra Buie-Gregory

For more information or questions, please contact:

Sandra Buie-Gregory, MCF Coordinator

Phone: 410-767-6213

Email: sbuiegregory@dhhm.state.md.us

4. Maryland Comprehensive Cancer Control Plan

For more information, please contact:

Sarah Conolly Hokenmaier, Acting CCSC Deputy Director

Phone: 410-767-0804

Email: shokenmaier@dhhm.state.md.us

5. CDC Colorectal Cancer Control Program; Working with Federally Qualified Health Centers and the Medicaid population to increase colorectal cancer screening – Ann Walsh

○ *Community Health Center Grants*

The CRCCP funds 4 community health center clinic locations (3 in Baltimore City and 1 in Montgomery County) to implement patient navigation programs in combination with clinical systems changes to track and increase breast, cervical and colorectal cancer screening. One clinic uses FIT/FOBT as their main screening method and the other three

use colonoscopy. The funded clinics are Baltimore Medical System's Belair- Edison clinic, Chase Brexton Health System's Cathedral Street clinic, Total Health Care's Division Street clinic and Mobile Med of Montgomery County through the Primary Care Coalition of Montgomery County (FIT/FOBT).

○ ***Medicaid Post Card Project***

CRCCP works with the state Medicaid office to send patient reminder post cards to Medicaid recipients ages 51-56 who are not up to date on CRC screening during Colorectal Cancer Awareness Month in March. The project also works with the Medicaid Managed Care Organizations (MCOs) to connect their outreach programs to state and local resources. One MCO, Amerigroup, is interested in reaching out to new community partners (such as the local CRF programs) in areas where they are planning health fairs and community events. We have provided Amerigroup with CRF Cancer program contact information. If you are contacted, we believe that partnering with them may be a mutually beneficial experience.

For more information or questions, please contact:

Ann Walsh, CRCCP Coordinator

Phone: 410-767-0816

Email: awalsh@dnhm.state.md.us

6. **Clinical Issues - Barbara Andrews, Kitty Musk**

- Regarding Health Officer Memo #11-51, we received a few comments on the template letter about “Other findings: Diverticular disease” with the suggestion that it be changed to “Diverticula” to reflect that the person had diverticula identified, but would not go so far as to state that the person had “diverticular disease,” which would be up to the clinician. Because of the change, **HO Memo #12-03 will replace HO Memo #11-51** and will be included as a Key Health Officer Memo.

Comments?

- Laboratory - Pathology charges for special stains
- The CPT code selection for special stains is driven by the type of stain.
 - Pathologists should provide as much documentation as possible to support the CPT code(s) assigned. There are special stains used to identify organisms, specific genes, etc. Pathologists should document the methods used in determining their findings, including special stains. They should mention the name of the stain and the findings as well.
 - Medicare provides the following guidance when reporting pathologist-ordered special stains:
 - These services are medically necessary so that a complete and accurate diagnosis can be reported to the treating physician/practitioner;
 - The results of the tests are communicated to and are used by the treating physician/practitioner in the treatment of the beneficiary; and
 - The pathologist documents in his/her report why additional testing was done.
 - Are programs seeing more special stains come through on their polypectomy specimens? If so, which stains are being ordered? How are you handling them? Are they pathologist-ordered? Or endoscopist-ordered? Other program comments?

7. Surveillance and Evaluation Unit Updates – Carmela Groves CDB and EDB

- Cancer Staging for CDB Data Entry: CRF-CPEST Programs are reminded that cancer staging information needs to come from the physicians/provider. We will revise the Prostate benchmarks and will only require programs to state if they have received the cancer staging or to put in Unknown if you cannot get the stage. Programs will NOT be required to address and meet the benchmark for prostate cancer staging.
- Health Office Memo #11-50: Client Database (CDB) Training Schedule Reminder for FY 2012-- next training is scheduled for February 6, 2012. Please contact Lorraine Underwood to register for training and for further instructions.
- Performance Measures (PMs) and Action Plans, including the PMs as stated in your grant/budget modification: Refer to HO Memo#12-02 and **please submit your Action Plans (if needed) as a part your mid-year FY2012 Progress Reports**, template provided in Health Officer Memo #11-53, by January 31, 2012.
- Client Database (CDB) Benchmarks. Please review your program-specific benchmarks (Health Officer Memo # 12-01) and edit CDB data, if appropriate (run Benchmarks Reports from Main Menu).
- CDB is planning to move back to the **Intranet**. Programs without Intranet access will need Virtual Private Network (VPN) access through the Internet. Each active user: **please test your connectivity by going to your Web browser and typing in: <http://fhaweb>**. If you see “Welcome to the FHA Intranet,” you are OK. Program Managers: Please assure every active user in your program has done this to assure that all of your personnel have access through the Intranet. Send Carmela Groves an e-mail for your program letting her know the connectivity status of your staff.

If you have any problems such as connecting to the EDB and CDB or navigating the system, you may contact:

Lorraine Underwood at lunderwood@dhhm.state.md.us 410-767-0791 (Main number)

Jia Soellner at jsoellner@dhhm.state.md.us 410-767-0815

CDBHelp@dhhm.state.md.us (Client Database)

EDBHelp@dhhm.state.md.us (Education Database)

8. Education and Training –Ahmed Elmi

- CaringBridge – Caring Bridge provides free websites that connect people experiencing a significant health challenge to family and friends. It offers websites, a personal and private space to communicate and show support. The websites may help individuals, their family and friends, save time and emotional energy when health matters most. The websites are easy to create and use. Health updates and photos can be shared while visitors leave messages of love, hope and compassion in the guestbook. Visit <http://www.caringbridge.org>
- CRC Awareness Packet and Dress in Blue Day, Friday, March 2, 2012
- Health Officer Memo #11-52; New Employee Orientation Materials including a Resources Checklist, Power Point Slides and Quizzes.
 - Point for discussion: **In addition** to the checklist and online orientation materials for new employees (to be posted soon when DHMH is ready to update our Web site), do you want the CCSC to do a periodic group orientation for new employees at the DHMH (e.g. 2-4 times yearly)?

- New Employee Orientation – If you have a new employee(s) who needs orientation or other education and outreach needs please contact Ahmed Elmi, Program Health Educator Phone: 410-767-0786, E-mail: aelmi@dhhm.state.md.us.

9. Administrative/Grants/Budget and Related Fiscal Issues – Barbara Andrews

- Health Officer Memo #11-53; CRFP/CPEST Program Progress Reports – Interim and End of Year Fiscal Year (FY) 2012. New this year, your Progress Report is to include information on how your program and/or your Community Health Coalition utilized the provided Maryland Comprehensive Cancer Plan information and strategies:

I.

F. Maryland Comprehensive Cancer Control Plan, 2011

<http://fha.maryland.gov/cancer/cancerplan/>: Describe specific activities regarding when and how the program and/or your Community Health Coalition utilized the Maryland Comprehensive Cancer Control Plan and its strategies.

Please place the Plan’s Chapter number, the Goal number, the Objective number, and the Strategy number in parenthesis after the text of your accomplishment (Example: In December 2011, our outreach staff distributed information from SunGuardMan.org web site

<http://sunguardman.org/documents/2010SGMFactSheet.pdf> and

<http://www.cancer.org/Cancer/CancerCauses/SunandUVEExposure/SkinCancerPreventionandEarlyDetection/index> to 15 massage therapists and 4 acupuncturists in the county (Chapter 7, Goal 1, Objective 1, Strategy 2).

- Medicare Reimbursement
Congress has postponed for 2 months the 27.4% cut in Medicare physician reimbursement that would have taken effect on January 1, 2012. For the present, CRF CPEST Program’s should continue reimbursing using the 2011 schedule provided in Health Officer Memo #11-14. Refer to the following web address for information about this Congressional action.

<http://www.californiahealthline.org/articles/2012/1/4/obama-signs-twomonth-relieve-for-medicare-reimbursement-cuts.aspx>

Future monthly teleconferences are scheduled for the third Wednesday, 10:00 a.m. to 12:00 noon of each month in 2011-2012 calendar years:

February 15

March 21

April 18

May 16

June 20

July 18

August 15

September 19

October 17