



STATE OF MARYLAND

**DHMH**

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Maryland Department of Health and Mental Hygiene

201 W. Preston Street • Baltimore, Maryland 21201

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

*Family Health Administration*

*Russell W. Moy, M.D., M.P.H., Director – Donna Gugel, Deputy Director*

CCSC HO # 11-03

**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 18, 2011

Subject: **Teleconference on CRF Cancer Programs – January 19, 2011**

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Attached is the agenda for the Teleconference on Wednesday, **January 19, 2011**, from 10:00 AM to 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**

**Guest Speaker: Suman B. Rao, M.D., Hematologist, Oncologist, Franklin Square Hospital. “Survivorship: New Challenge in Cancer Care”**

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

cc: Russell Moy, MD, MPH  
Donna Gugel, MHS,  
Kelly Sage, M.S.  
Diane Dwyer, MD, Barbara Andrews

**Cancer CRF Teleconference  
DHMH Center for Cancer Surveillance and Control  
Wednesday, January 19, 2011, 10:00-12:00 P.M.**

**Dial in** to the following “**Meeting Place**” dial in number:

**410-225-5300.**

Meeting ID Number: **9339#**

Please turn your phone to MUTE unless you are asking a question—and DO NOT put your phone on Hold during the teleconference (or we will hear background music). Thanks.

**Agenda**

1. **Guest Speaker - Suman B. Rao, Hematology/Oncology, Franklin Square Hospital**  
“Survivorship: New Challenge in Cancer Care” Attachment 1. in PDF, and in PDF (4 per page) for printing as handout.
2. **Maryland Skin Cancer Prevention Program Update – 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  
410-539-0872 ext. 3340 or 800-492-1056, ext. 3340 or email at [rherbst@medchi.org](mailto:rherbst@medchi.org)
3. **Minority Outreach and Technical Assistant Updates – Truemenda Green**  
For more information or questions, please contact:  
Truemenda Green at 410-767-8954 or e-mail at [tcgreen@dhhm.state.md.us](mailto:tcgreen@dhhm.state.md.us)
4. **Maryland Cancer Fund**  
Introducing Sandra Buie-Gregory, MCF Coordinator, 410-767-6213,  
[sbuiegregory@dhhm.state.md.us](mailto:sbuiegregory@dhhm.state.md.us)

**Maryland Cancer Fund Update**

- FY 2010 MCF Treatment Grants
  - Over \$380,000 provided for treatment grants
  - 40 individuals received diagnostic work-up or treatment
- FY 2011 MCF Treatment Grants as of January 2011
  - 40 requests for grants applications
  - 30 applications completed and granted
  - 9 applications pending
  - 1 application withdrawn
- FY 2010 - FY 2012 MCF Grant Recipients
  - Primary Prevention Grant
    - Garrett County HD: Focus on residents of subsidized housing facilities to promote physical activity and proper nutrition and to provide tobacco cessation classes or tobacco prevention events.
  - Early Detection/Secondary Prevention Grant

- Baltimore County HD (FY 10 only): colorectal, skin and prostate cancer screening.
  - Cecil County HD: colorectal cancer screening.
  - Shore Health System: prostate cancer screening.
  - MedStar: colorectal cancer screening.
- FY 2011 - Promoting the Maryland Cancer Fund
  - Send mass mailing at tax season to tax preparers to encourage donations.
  - Send Health Officer Memo with copy of information mailed to tax preparers for local use.
  - Participate in Manic Monday on WJZ (Baltimore station) 1/24/2011 to encourage individuals to donate to MCF on their 2010 Maryland income tax forms. (<http://baltimore.cbslocal.com/show/manic-monday/>)

**Join “Manic Monday” this year, Monday, January 24 at 5:45 AM at Fells Point in front of Jimmy’s Restaurant, 801 South Broadway, Baltimore, MD. Bring your best singing voice (!) and plan to stay for breakfast.** You may Google “Manic Monday lyrics” to get the words (we only sing the first verse and the refrain).

## 5. Maryland Comprehensive Cancer Control Plan

Thank you for attending the 17th Maryland State Council on Cancer Control Annual Cancer Conference. For information, please Sarah Hokenmaier at 410-767-0804 or [shokenmaier@dhhm.state.md.us](mailto:shokenmaier@dhhm.state.md.us). Presentations and some pictures are now posted at <http://fha.maryland.gov/cancer/cancerplan/html/conferences.cfm>

## 6. CDC Colorectal Cancer Control Program

For more information or questions, please contact:

Ann Walsh at 410-767-0816 or [awalsh@dhhm.state.md.us](mailto:awalsh@dhhm.state.md.us)

## 7. Surveillance and Evaluation Unit Updates – Carmela Groves

- Health Officers Memos:
  - CRF Cancer Report, CCSC Health Officer Memo #11-02
  - Revised Client Database Forms: Core Demographics Required, and CRC Screening, CCSC Health Officer Memo #11-01
  - CRF Benchmarks, FY11, First Quarter, CCSC Health Officer Memo #11-05
  - Performance Measures mid year FY2011, CCSC Health Officer Memo #11-04
  - Client Database Training being offered monthly, CCSC Health Officer Memo #10-44
- New security requirements for the CDB as a result of the recent changes that made the CDB an Internet-based application.
- 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](mailto:lunderwood@dhhm.state.md.us) 410-767-0791 (Main number)
  - Jia Soellner at [jsoellner@dhhm.state.md.us](mailto:jsoellner@dhhm.state.md.us) 410-767-0815
  - [CDBHelp@dhhm.state.md.us](mailto:CDBHelp@dhhm.state.md.us) (Client Database)
  - [EDBHelp@dhhm.state.md.us](mailto:EDBHelp@dhhm.state.md.us) (Education Database)

## 8. Education and Outreach –Ahmed Elmi

- Health Care Professional education strategies used since 2000. Programs inquired at the Regional Meetings about the type of Provider Education being done by local programs. See Attachment 2 for the Provider Education Strategies used since 2000 as entered in the Education Database. People interested in more information about any of the strategies may contact Ahmed Elmi at 410-767-0786 or [aelmi@dhhm.state.md.us](mailto:aelmi@dhhm.state.md.us). Ahmed can put you in touch with the program doing that type of outreach for details.
- CRC Awareness Packet will be provided via a Health Officer Memo by the end of January.
- Providing equal access to services is a key factor in overcoming barriers to care and to overcoming disparities. There are instances of which we are aware where programs had patient’s relatives translate for them. **DHMH Policy on Equal Access to DHMH Services by Individuals with Limited English Proficiency (LEP) (Policy 02.06.07)** is provided in Attachment 3. Below are some of the key areas of this policy:
  - CRF programs are considered “covered entities” including their contractors and subcontractors that provide direct services to the public, and therefore must comply with the policy.
  - Clinical documents including the Consent Form are considered the “Vital Documents” that individuals applying for services or benefits must understand, respond to, or complete in order to access the services/benefits or continue to receive the services or benefits.
  - CRF programs cannot require and/or request that individuals with LEP utilize family members, especially minor children or friends, as foreign language interpreters.
  - A person’s own interpreter should only be used at the request of the individual with LEP, and when use of that interpreter would not compromise the effectiveness of services or violate the LEP individual’s confidentiality. A LEP individual’s request to use his/her own interpreter will be noted in the individual’s record.
  - If the program utilizes in-house staff interpreters, these staff members should be appropriately trained to provide needed services. “Appropriately trained” means that the in-house staff interpreter is:
    - ❖ proficient in both English and the language spoken by the LEP individual;
    - ❖ oriented or trained in the ethics of interpreting; and,
    - ❖ has fundamental knowledge in both languages of specialized terms and concepts used in the subject program.

### • Resources

Johns Hopkins Medicine Gastroenterology and Hepatology Web site has very useful images for colorectal cancer screening and treatment. Copy the link below and paste it on the URL/section for web address.

[http://www.hopkins-gi.org/GDL\\_Disease.aspx?SS=&CurrentUDV=31&GDL\\_Cat\\_ID=AF793A59-B736-42CB-9E1F-E79D2B9FC358&GDL\\_Disease\\_ID=FB4F2BE3-FC13-44E4-BB69-2CCE936A6CD5](http://www.hopkins-gi.org/GDL_Disease.aspx?SS=&CurrentUDV=31&GDL_Cat_ID=AF793A59-B736-42CB-9E1F-E79D2B9FC358&GDL_Disease_ID=FB4F2BE3-FC13-44E4-BB69-2CCE936A6CD5)

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

- **Community Health Coalition**

- Appointee Exemption Disclosure Form and Guidance – Refer to Health Officer Memo #10-42. A blank Disclosure Form for your use is attached here (see Attachment 4).
- Please ensure that your local government representatives are invited to your coalition meetings and are informed of other opportunities for education and involvement in your CRFP-CPEST cancer control activities/programs and Community Health Coalition.

- University of Maryland Medical System, Baltimore has not given the Baltimore City program a special or negotiated rate lower than the HSCRC rate for HSCRC clinical services. (This issue came up at the regional meetings.)

- The CCSC is coordinating due dates for BCCP and CRFP-CPEST FY12 Grants so that they will be approximately two weeks apart.

- **Pathology/Laboratory Reimbursement for colonoscopy specimens:**

Some pathology laboratories are billing programs by the number of fragments in a vial rather than by the number of specimens submitted for processing. Programs should first review the pathology results sheet and note the number of specimens submitted and then match that number to the pathology bill. Programs generally should pay *per specimen processed* and not pay for each *fragment* processed.

For example, two polyp specimens “A” (received in one piece), and “B” (received as two fragments of tissue) are noted in the pathology report. The invoice comes in requesting payment for three tissue specimens processed. The program should pay for **two** specimens (CPT e.g., 88305) and not for three. Programs may include in their pathology laboratory contracts that they will pay *per specimen*. Programs may also contact us about the billing if you have any questions.

- **New Employee Orientation**

We are in the process of completing online orientation that will cover basic orientations components, except the Client Database. In the meantime, if you have a new employee who needs orientation, please contact Ahmed Elmi at 410-767-0786 or [aelmi@dhhm.state.md.us](mailto:aelmi@dhhm.state.md.us).

- **Requested Teleconference Discussion Issues**

You may e-mail us your questions ahead of time to any of the above staff at the CCSC; you may send a copy to Barbara Andrews ([bandrews@dhhm.state.md.us](mailto:bandrews@dhhm.state.md.us)) who will coordinate the list of incoming questions for future teleconferences.

Mark your calendars for the following dates for CCSC/CRF Teleconferences. We will cancel them if we don't have sufficient items to warrant holding the teleconference.

**Third Wednesday, 10:00 a.m. to 12:00 noon for 2011**

February 16

March 16

April 20

May 18

June 15

July 20

August 17

September 21

October 19

November 16

December 21