

STATE OF MARYLAND

DHMH

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, M.D., Secretary

Family Health Administration Russell W. Moy, M.D., M.P.H., Director

<u>MEMORANDUM</u>

CCSC HO # 11-32

 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: June 14, 2011

Subject: Teleconference on CRF Cancer Programs – June 15, 2011

Attached is the agenda for the Teleconference on Wednesday, June 15, 2011, from 10:00 -11:30 a.m.

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: Russell Moy, M.D., M.P.H. Donna Gugel, M.H.S, Courtney Lewis, M.P.H. Diane Dwyer, M.D. Barbara Andrews Cancer CRF Teleconference DHMH Center for Cancer Surveillance and Control Wednesday, June 15, 10:00-11:30 a.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

- 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: <u>rherbst@medchi.org</u>
- 2. Minority Outreach and Technical Assistant Arlee Gist

Based on the FY 2012 budget request funds are available for MOTA. After the close of the session (April 11, 2011) a public notice will be placed on MHHD's website: http://dhmh.maryland.gov/hd/ For more information or questions, please contact: Arlee Gist, Deputy Director, Minority Health and Health Disparities Phone: 410-767-1052 Email: agist@dhmh.state.md.us

3. Maryland Cancer Fund

For more information or questions, please contact: Sandra Buie-Gregory, MCF Coordinator Phone: 410-767-6213 Email: <u>sbuiegregory@dhmh.state.md.us</u>

4. Maryland Comprehensive Cancer Control Plan

For information, please contact: Sarah Hokenmaier, Program Coordinator Phone: 410-767-0804 Email: <u>shokenmaier@dhmh.state.md.us</u>.

5. CDC Colorectal Cancer Control Program

For more information or questions, please contact: Ann Walsh, Program Coordinator Phone: 410-767-0816 Email: <u>awalsh@dhmh.state.md.us</u>

- 6. Maryland Health Insurance Program (MHIP) eligibility options for patients who do not yet have a diagnosis of cancer Connie Notaro, RN, Baltimore County CPEST Program
 - a. What does MHIP require for eligibility?
 - i. Diagnosis
 - ii. Denial of health insurance
 - iii. Health insurance premiums too high to be affordable for the individual

- b. How can you help an individual without a qualifying cancer diagnosis become eligible?
- 7. Updates on Quality of Colonoscopy and Endoscopy Contract—Diane Dwyer

Colonoscopy local report feedback: Responses received from the following counties.

Allegany County Baltimore County Department of Health Cecil County Health Department Charles County Health Department Frederick County Health Department Garrett Harford County Howard Montgomery County Queen Anne's County Department of Health St. Mary's County Health Department Washington County Health Department Wicomico County Health Dept.

Upper Shore Health Officers will talk about their plan maybe in September. Others?? Comments?? Survey is still open for receiving your information: https://www.surveymonkey.com/s/ColQA FeedbackReport

Handling Colonoscopy Feedback Reports as of 6/13/2011

as of 6/13/2011	Counties		
Mail to colonoscopist with letter from HO and Dr.			
Watkins	Cecil, Charles		
Mail to colonoscopist with letter from HO	Baltimore, Frederick, Howard, Harford*		
Write and ask if they want it; send if they say Yes	St. Mary's, Washington, Wicomico		
Notify them that it is available before sending it	Montgomery		
Meet and deliver in person	Allegany		

*met with doctors, then mailed reports

8. Methods for dispensing colonoscopy preparation products—Diane Dwyer

- a. HD purchases and gives to the patient
 - i. Deliver to the patient
 - ii. Patients pick up at the HD
 - iii. HD mails to the patient
- b. HD purchases and give to doctors to give to patients
- c. HD gives pharmacy voucher to the patient
- d. HD gives a list of what the patient should purchase over the counter and patient is responsible for purchasing at own expense
- e. Others?

Discussion of pros, cons, and problems associated with the methods

9. Medicare billing for colonoscopies that Medicare does not consider "screening colonoscopy"—Diane Dwyer

- a. Program experiences discussion.
- b. Use of the Modifier "PT" after the colonoscopy procedure CPT code(s) to indicate Screening Colonoscopy. See <u>https://www.highmarkmedicareservices.com/bulletins/partb/med-reports/pdf/mr0311.pdf</u>, page 17. Do providers know? If they use PT, what is their experience? Feedback from patients?

10. Eligibility for Treatment Services under CRF funding—Diane Dwyer

a. Legislative Auditors have reviewed the local programs' eligibility for treatment services (Attachment 9 of the CPEST grant applications) and have said that eligibility should be standardized across the programs. We will be sending a Health Officer Memo about this soon. It will probably require at least a new Attachment 9 for your FY12 grants.

11. Non-Chargeable List—Diane Dwyer

a. New Non-Chargeable List coming out 7/1/2011 will have oral cancer screening, oral brush biopsy, and skin cancer screening as new Non-Chargeable services. Still, our screening efforts should focus on looking for people who are **low income and uninsured** to participate in CRF funded screening. The revisions in the Non-Chargeable List relaxes the eligibility for screening requirements.

12. Surveillance and Evaluation Unit Updates – Eileen Steinberger, Annette Hopkins

- a. CDB 2nd quarter benchmarks (Health Officer Memo #11-27): if questions, call/email Carmela Groves
- b. CDB Training Next training, 6/24/11; see HO Memo #11-31 for the remaining 2011 schedule. Contact Lorraine Underwood to register.
- c. Reminder Please enter your data into CDB and EDB for FY11 by July 15, 2011 for the end of year summaries including Progress Reports. Thanks!
- d. CDB Updates:
 - i. Expanded DCBE (double contrast barium enema) procedure to 'Imaging"; this allows user to enter virtual colonoscopies, single contrast barium enema (SCBE) in addition to DCBE (see Screen Shots on page 6 below)
 - ii. Fixed the glitches on the oral screening cycle reports
 - iii. Providing instruction (see Screen Shots on page 7 below) on the Compatibility Mode setting; this may be an issue when changing sponsors
- e. EDB The EDB is being converted to a newer software program called 'asp.net.' This is a change to the 'front end' (or screens) of the database. **The change should be seamless to the user– it has the same look and feel;** however, if you experience any issues or error messages, please notify us. This change should occur the beginning of next week.

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

Lorraine Underwood at <u>lunderwood@dhmh.state.md.us</u> 410-767-0791 (Main number) Jia Soellner at <u>jsoellner@dhmh.state.md.us</u> 410-767-0815 CDBHelp@dhmh.state.md.us (Client Database)

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

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

- a. Just a reminder that Health Officer Memo #11-24, dated 4/19/11, regarding Melanoma and Skin Cancer Detection and Prevention is good information to use for health promotion during vacation time. The attachments included fact sheets, PowerPoint slide presentations, and templates for PSA, news release, and the proclamation. For more information or questions, please contact: Ahmed Elmi, Program Health Educator at 410-767-0786 or <u>aelmi@dhmh.state.md.us</u>.
- b. **Fiscal Year 2012 CRF-CPEST Grant Applications:** Thank you for your timely submissions. Following our initial reviews, we see that several local programs have not provided the needed rationale for Performance Measures that are above or below the 3-year average/range. Your lead contact with our CRFP Unit will contact you if revisions or additions are needed to your application for Performance Measures and any other issues.
- c. **CRF-CPEST Regional Meetings October 2011**. Please let us know if you have some particular areas of interest that you would like us to present or discuss.
- d. **Contact Information** of local programs Please email any staff contact information changes/revisions to your "lead contact" and Dwayne Selph at <u>dselph@dhmh.state.md.us</u>
- e. **New Employee Orientation** If you have a new employee(s) who needs orientation; please contact Ahmed Elmi at 410-767-0786 or <u>aelmi@dhmh.state.md.us</u>.
- f. **Requested Teleconference Discussion Issues** You may e-mail us your questions ahead of time to any of the above staff at the CCSC or send a copy to Barbara Andrews (<u>bandrews@dhmh.state.md.us</u>) who will coordinate the list of incoming questions for future teleconferences.

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

July 20 August 17 September 21 October 19 November 16 December 21

Client Database (CDB) Screen Shots

Imaging (instead of DCBE) CRC Screening Form, Page 2: Select type of Imaging procedure

CRC Screening Form, Page 2: Select type of Imaging procedure Screening Recommended						
Screening	Pre-Screening	Physical Exam	Sigmoidoscopy	Colonoscopy	Imaging	
(check all that apply)					Type:	
Date Scheduled					Type:	
ate escheduled					SCBE	
rovider	Select Provider 🔽	Select Provider 💌	Select Provider 🗸	Fortythree, Glen 👻	Select provider	
lot Performed n Program select eason)	Ineligible Refused Lost to follow-up Moved Chose other provider No longer recommended Other Clear reasons	Ineligible Refused Lost to follow-up Moved Chose other provider No longer recommended Other Clear reasons	Ineligible Refused Lost to follow-up Moved Chose other provider No longer recommended Other Clear reasons	Ineligible Refused Lost to follow up Moved Chose other provider No longer recommended Other Clear reasons	Ineligible Refused Lost to follow-up Moved Chose other provider No longer recommended Other clear reasons	
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	py or Imaging R		nded] ype: Virtual Col			_
Biopsy Done: O Yes O No O Not applicable [Imaging] Clear						
Was bowel prep adequate?						
Was cecum reached?						
Adequate Exam: O Yes O No Date Results Received by Program:						
Findings: Confirmed cancer, specify type: [check all that apply] Specify location:						
	Presumed/Susp					
Adenoma, specify:						
Size of largest adenoma [in mm]: Large adenoma:Select 💌 🕐						
Pathology: Histology of most advanced lesion: Tubular (least advanced) Tubulovillous Villous (most advanced)						
Were any of the adenomas called high-grade dysplasia on pathology, (high-grade dysplasia, severe dysplasia, carcinoma-in-situ, intramucosal carcinoma)?						
	Were any of th	ne adenomas describe	ed as "serrated"?	No Clear		
Hyperplastic polyp[s], specify number:						
Other polyp/polyp type not otherwise specified [e.g., identified by sight and no pathology]:						

Compatibility Mode

