



**Cancer Task Force
Cecil County Community Health Advisory Committee
January 16, 2014**

Objective #	State Health Improvement Plan Measure (County Base Source)	County Baseline 2011	County Update 2012	MD Update 2012	MD 2014 Target
26	Rate of cancer deaths per 100,000 population (age adjusted) (VSA 2007-2009)	220.2	206.0	170.9	169.2

Updates for Union Hospital

Beth Money, Cancer Program Manager at Union Hospital reported:

- “Kids Can Cope” meets the second Wednesday and “I Can Cope” (for adults) meets the third Wednesday of the month at Union Hospital. They are support groups for those who are dealing with cancer or chronic disease. A Cancer Survivorship Workshop will be held on the first Monday of each month beginning on January 6, 2014 from 5:30 pm to 7:00 pm in Union Hospital’s Meeting Room 1.
- Prostate Cancer Screening was held in September. Forty-four men were screened.

Tracy Anderson and Susan DeWitt, Union Hospital Breast Health Center, reported:

- Plans are within 2 years to purchase breast 3-D imaging equipment.
- The Breast Cancer Support Group meets the third Tuesday of the month.
- Routine self-referral mammograms without a physician’s order can now be obtained. Dr. Lowe will receive the results if the client does not have a primary care provider.

A policy for Affordable Care Act Implementation for the Cecil County Cigarette Restitution Fund Program Cancer Grant for Prevention, Education, Screening, Diagnosis and Treatment (CPEST), Maryland Cancer Fund (MCF) and Breast and Cervical Cancer Screening Program (BCCP) was approved by the Cancer Task Force and will begin 1/1/14.

- Eligibility criteria include: uninsured and underinsured client who has: Medicare A only; a deductible \$300 or greater that has not been met. For service fees for applicable procedures due to the client’s deductible amount not being met, the client is responsible for the \$299. 99 of the deductible and the program will pay the balance of the deductible, until the deductible has been met.
- Programs may reimburse for clinical services for an eligible client initiating an application for insurance at the time of their enrollment or recall to the program. If the client’s health coverage is retroactive, the program may recoup funds for a paid service from a provider participating with the client’s health insurance, per the health department’s/hospital’s established processes.
- The allowable reimbursement fee for services is up to the allowable Health Services Commission, CPEST or BCCP Medicare/Medicaid reimbursement rate fee schedule minus the insurance amount.
- BCCP: For co-insurance and co-pays 1,000 for each per client per calendar year will be paid.
- CRC: For co-insurances and co-pays up to \$1,000 for each per client per calendar year will be paid.

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ADMINISTRATIVE SERVICES410-996-5550	ENVIRONMENTAL HEALTH SERVICES410-996-5160
ALCOHOL & DRUG RECOVERY CENTER410-996-5106	HEALTH PROMOTION410-996-5168
OFFICE OF EPIDEMIOLOGY & EMERGENCY PREPAREDNESS410-996-5113	SPECIAL POPULATIONS MENTAL HEALTH C.S.A.410-996-5112
COMMUNITY HEALTH SERVICES410-996-5130	TTY USERS FOR DISABLED: MARYLAND RELAY800-201-7165
DISEASE CONTROL410-996-5100	EN ESPAÑOL410-996-5550 EXT. 4680

HEALTH DEPARTMENT TOLL FREE . . . 877-334-9985

- MCF: For co-insurances and co-pays up to \$5,000 per calendar year per client will be paid.

Small Media Provider Pilot/ Patient Navigation Program:

- All sites have been contacted regarding new small media materials to be developed. The sites have said that post cards, myth/fact sheets, videos for waiting rooms and a phone hold message would be helpful.
- The next chart audits will take place in December 2013 and January 2014.
- Patient Navigation services continue at one provider's office. The presence of the patient navigator at the site has encouraged discussion between the providers and the clients about breast, cervical and colorectal cancer screening. Navigators are receiving referrals for colorectal, breast and cervical cancer screenings. Navigation activities have been successful as screenings have been completed. Female clients referred to patient navigation services are more willing to have breast and cervical cancer screening than colorectal cancer screening, due to the fact that patients can be seen after work in the physician's office for the breast exam and also obtain a mammogram appt after work hours. Approximately 20 clients are receiving patient navigation services at this time.

The next Cancer Task Force meeting will be held on 3/14/14 at Noon in the Cecil County Health Department auditorium.

