



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

Requested Board Meeting Date: June 20, 2017

or Procurement Director Award

Contractor/Vendor Name (DBA): Arizona Department of Health Services (ADHS)

Project Title/Description:

Well Woman Healthcheck Program

Purpose:

Provide access for uninsured and/or underinsured women to receive breast and cervical cancer screening and follow up services. Amendment #2 extends the term to January 28, 2019 and adds Scope requirements such as care coordination for insured women.

Procurement Method:

Grant award.

Program Goals/Predicted Outcomes:

The program aims to provide:

- Clinical breast exams, mammograms and pap tests to eligible women;
- Diagnostic services to detect breast and cervical cancers for women with abnormal screening results;
- Case management to ensure that women access and receive services;
- Care Coordination to provide individualized service planning and assistance in securing access to services for insured women with abnormal breast or cervical issues;
- Development of Survivorship Care Plans for Cancer survivors; and
- Training and education about the program to community members and health professionals.

Public Benefit:

The WWHC program in Pima County has been providing screening and diagnostic services since 1995 through subcontracts with community providers. In FY15-16, 1,062 women were screened, 414 were referred for further diagnostics, and 24 were referred for cancer treatment. In addition to screening and diagnostic services, the program educated more than 700 women about breast and cervical health, the importance of regular screening and early detection, and community resources for women.

Metrics Available to Measure Performance:

of clinical breast exams

of mammograms provided

of pap tests

of women referred for future diagnostics

of women referred for cancer treatment

Retroactive:

No.

Original Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____

Effective Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____

Expense Amount: \$ _____ Revenue Amount: \$ _____

Funding Source(s): _____

Cost to Pima County General Fund: _____

Contract is fully or partially funded with Federal Funds? Yes No Not Applicable to Grant Awards

Were insurance or indemnity clauses modified? Yes No Not Applicable to Grant Awards

Vendor is using a Social Security Number? Yes No Not Applicable to Grant Awards

If Yes, attach the required form per Administrative Procedure 22-73.

Amendment Information

Document Type: GTAM Department Code: HD Contract Number (i.e., 15-123): 17*66

Amendment No.: Two AMS Version No.: 1

Effective Date: Upon signature New Termination Date: 01/28/2019

Expense Revenue Increase Decrease Amount This Amendment: \$ no change in price

Funding Source(s): ADHS / CDC

Cost to Pima County General Fund: \$0.00

Contact: Sharon Grant

Department: Health

Telephone: 724-7842

Department Director Signature/Date: [Signature] F.R.F.B. 5/25/2017

Deputy County Administrator Signature/Date: [Signature] 6/3/2017

County Administrator Signature/Date: [Signature] 6/6/17
(Required for Board Agenda/Addendum Items)



CONTRACT AMENDMENT

ARIZONA DEPARTMENT OF HEALTH SERVICES
 150 N. 18th Ave. Suite 260
 Phoenix, Arizona 85007
 (602) 542-1040
 (602) 542-1741 FAX
 Procurement Specialist
 Russell Coplen

Contract No: **ADHS14-064601**

Amendment No: **2**

Well Woman Healthcheck Program

Effective upon signature, it is mutually agreed that the Agreement referenced above is amended as follows:

1. Pursuant to Special Terms and Conditions, Provision Three (3), Contract Extensions Five (5) Year Maximum, the contract shall be extended for the Fifth (5th) year through January 28, 2019.
2. Pursuant to Uniform Terms and Conditions, Provision Five (5), Contract Changes, Provision 5.1, Amendments, Contract Deliverables shall be added by this Amendment Two (2).

All other Provisions shall remain in their entirety.

Contractor hereby acknowledges receipt and acceptance of above amendment and that a signed copy must be filed with the Procurement Office before the effective date.

The above referenced Contract Amendment is hereby executed this _____ day of _____, 2017 at Phoenix, Arizona

Signature / Date

Chief Procurement Officer

Authorized Signatory's Name and Title


Pima County

Contractor's Name

REVIEWED BY: 

Appointing Authority or Designee
Pima County Health Department


APPROVED AS TO FORM:
Deputy County Attorney

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Well Woman HealthCheck Program

1. Purpose

Over time the Centers for Disease Control and Prevention (CDC) changes the program requirements for all grantees of the National Breast and Cervical Cancer Early Detection Program (NBCCEDP). When that happens, the Well Woman HealthCheck Program (WWHP) must change contractor requirements to meet the changing CDC requirements. Over the past four years, Arizona Department of Health Services (ADHS) has been teaching the contractors about systems change, evidence based initiatives, monitoring and reporting screening baselines, and care coordination. This amendment will outline the specific requirements for each of these areas.

2. Systems Change

2.1. The WWHP contractors have received multiple training sessions on how to measure screening rates. They currently report these rates to ADHS quarterly. CDC has standardized the process for determining screening rates and has provided grantees with a document addressing colorectal cancer screening rates. The process description can be applied to breast and cervical cancer screening rates as well.

2.2. All WWHP contractors shall follow the process described in Guidance for Measuring Colorectal Cancer (CRC) Screening Rates in Health System Clinics, or other guidance that may be provided by CDC, to determine their breast and cervical cancer screening rates. Those rates shall be reported to CDC annually and to ADHS quarterly. Reports shall include the numerator and denominator. All rates shall be assessed using descriptors from existing national standards: Government Performance and Results (GPRA), Health Care Effectiveness Data and Information Set (HEDIS), Uniform Data System (UDS), or National Quality Forum (NQF). The timeframe and process for determining the screening rates will be kept consistent from year to year. The CDC Guidelines can be found at:

https://www.cdc.gov/cancer/crccp/pdf/guidance_measuring_crc_screening_rates.pdf

2.3. Systems change efforts are truly quality improvement efforts with evidence based initiatives impacting the entire clinic process flow. Each clinic system shall have their CEO and CMO sign a Letter of Commitment agreeing to the following by July 30, 2018:

2.3.1. The use of evidence based initiatives to improve breast and cervical cancer screening rates in all clinics providing services for the WWHP;


2.3.2. The provision of IT support to create and pull reports as needed to support this important quality improvement effort;

2.3.3. The operational support to assess and determine clinic patient flow and to attempt revisions when necessary;

2.3.4. Provider cooperation and support for provider reminders and provider assessment and feedback;

2.3.5. Providing time at several provider meetings per year for reporting on breast and cervical cancer screening rates and progress on improvements;

2.3.6. Provide support for program staff to complete one provider education session, with Continuing Medical Education (CMEs) per program year; and

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2.3.7. Providing support for care coordination of insured patients through breast and cervical cancer screening and diagnostics.

3. Evidence Based Initiatives

3.1. Each WWHP shall select the Evidence Based Initiatives (EBIs) they shall use over time in each clinic participating in the WWHP. They may select client and provider reminders as well as small media in one clinic and different EBIs for another clinic. Each clinic site must select at least two EBIs to implement for the program year. For this reason and others, the clinics shall report clinic specific rates, not just system wide rates. If only Four (4) of the Federally Qualified Health Center (FQHC) system's five (5) clinics are providing WWHP services, only report the rates for the four (4) clinics (each one separately) to ADHS. If that system is also reporting a Uniform Data System (UDS) Rate to Health Resources & Service Administration (HRSA), report that in addition to the clinic specific rate.

4. Care Coordination

4.1. WWHP pays for breast and cervical cancer screening and diagnosis clinical services for uninsured women (including patient navigation) and care coordination/patient navigation services through breast and cervical cancer screening and diagnostics for insured patients. Care Coordination of insured patients through this process shall support increasing each clinic's breast and cervical cancer screening rates. The contractor is required to use EBIs to increase the screening rates for insured as well as the uninsured women using their health care system. Contractors must submit to ADHS the number of insured women 40 years and older that have used their clinic within the past twelve months by July 30, 2017. Contractors are required to submit complete monthly Care Coordination/Patient Navigation Forms to ADHS. If the form is not submitted in a complete fashion on a monthly basis, the Personnel and Employee Related Expenses (ERE) portion of the contract shall be reduced to reflect the lack of care coordination services.

4.2. Improving breast and cervical cancer screening rates and Care Coordination/Patient Navigation are required to fulfill the contractual commitments of the WWHP. As CDC changes programmatic requirements, the contractor agrees to meet those changing requirements.

5. Patient Education


All patients receiving services through the WWHP, clinical services or Care Coordination, shall receive one-on-one education on breast cancer screening and diagnostics and/or cervical cancer screening and diagnostics (dependent upon the service being provided).

6. Insurance Enrollment

All contractors shall submit to ADHS reports on the number of women applying for the program that subsequently enrolled in Medicaid (year round) or the online health insurance marketplace (during open enrollment). These reports shall be submitted with the Quarterly Report.

7. Survivorship

7.1. Contractors shall provide survivorship support to all breast and cervical cancer patients diagnosed through their clinics (these services can also be accessed by other cancer patients using the health care system). Representatives of all the programs listed below have provided education sessions at the quarterly contractors' meetings.

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7.1.1. Bag It!

Not for profit organization providing a vetted survivorship tool comprised of cancer education and survivorship materials for all cancer patients. The contractor's Other category of funds can be used to support the 50% financial support required by Bag It! More information can be found at the website, bagit4u.org.

7.1.2. Cancer Support Community

Not for profit organization providing support groups, education sessions, relaxation techniques and other support for cancer survivors and their families. Most of these are available in Maricopa County. The Cancer Support Community is working to spread this level of support to other areas of the state. Learn more at: cscaz.org.

7.1.3. LIVESTRONG at the YMCA

YMCAs across Arizona are activating a cancer survivorship program that is free of charge to cancer survivors. The program provides 12 weeks membership at the YMCA, a 12 week course in exercise and nutrition, and materials developed by the LIVESTRONG Foundation. Learn more at [LIVESTRONG at the YMCA](http://LIVESTRONGattheYMCA).

7.1.4. Chronic Disease Self-Management Program

This program is available throughout Arizona through county health departments. This program addresses multiple topics related to chronic disease; it is six weeks in length with one 2.5 hour session per week. There are costs associated with this course; compliance with course completion improves when patients contribute to a portion of the cost. Learn more at azlwi.org.

7.1.5. Survivorship Care Plans

Commission on Cancer (CoC) certified facilities require that their cancer patients receive a Survivorship Care Plan (SCP). There are many models of SCPs (a Google search can provide several options). Contractors are required to educate their subcontractors that all women diagnosed with cancer through the WWHP or receiving Care Coordination support through the WWHP shall receive a Survivorship Care Plan.

8. Quality Improvement

8.1. Each contracted entity has Quality Improvement Managers. The Quality Improvement Managers shall attend the quarterly Well Woman HealthCheck Program meetings. The meeting dates are provided at the beginning of the program year allowing staff to block those dates far in advance. This attendance is in addition to attendance by the WWHP Program Manager.

8.2. The work of the WWHP contractors is increasingly focused on Quality Improvement. The Arizona Alliance for Community Health Centers, (AACHC), has monthly Quality Improvement Committee (QIC) meetings. The FQHCs contracted with WWHP shall have their QI managers attend the monthly QIC meetings held by the AACHC. The work of the AACHC QIC is very closely aligned with the WWHP. Attendance at both sets of meetings will position the contracted clinic for success.



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Amendment Deliverables:

Item	Due Date
CEO and CMO Letter of Support	July 30, 2017
Selection of EBI's to use per clinic site	August 30, 2017
Number of uninsured women 40+ using clinic in past twelve months	July 30, 2017, annually thereafter
Breast and Cervical Cancer Screening Rates Inclusive of Numerator and Denominator and specific description of standard being used (HEDIS, UDS, GPRA or NQF)	September 29, 2017 – Baseline December 30, 2017, March 30, 2018, June 30, 2018
Number of Insured Women 40+ using clinic in past twelve months	July 30, 2017, annually thereafter
Care Coordination Forms – completed	Monthly
Proposed date and topic of Provider Education Session. It is required that CMEs are offered.	July 30, 2017 and annually thereafter
Medicaid and Online Insurance Enrollment Data	Quarterly with Quarterly Reports