

### **Cervical Cancer Screening HMO QI Fund Project**

In 2008 the Cervical Cancer Screening HMO QI Fund Project involved only member and physician outreach. The project results for several years were below the established goals for cervical cancer screening. In an effort to increase the number of women who receive cervical cancer screening, the outreach project was implemented.

The goals of the 2008 Cervical Cancer Screening physician and member outreach portion of the QI Fund Project were to:

- To encourage PCPs and WPHCPs to recommend preventive care services to their patients
- To improve IPA provision of preventive care
- To provide IPAs with a tool to identify populations for outreach based on eligibility and administrative data
- To motivate IPAs to develop systems to perform physician and member outreach

The results for the Outreach Portions of the 2008 Cervical Cancer Screening HMO QI Fund Project results are as follows:

<b>2008</b>	<b>Number of IPAs Meeting Project Requirements</b>
Submission of a completed Attestation Form with required supporting documentation of all required elements.	99% (77/78)

### **Identified Barriers to Physician and Member Outreach for Cervical Cancer Screening**

Physicians:

- May not routinely recommend Pap smears to their patients
- May not have a systematic method to track preventive services

IPAs:

- The D2 Preventive Care module was not available as early in the year as planned.
- The IPAs were not familiar with the D2 preventive care module.
- Some IPA encounter data may have been incomplete or not submitted timely.
- Some IPAs had never performed preventive care outreach and did not have systems in place for outreach.
- Some IPAs and physicians may not be aware of the value of physician outreach to members.
- Some IPAs were not aware of the volume of members requiring outreach.
- Some IPAs were not aware of the cost and resources associated with performing member outreach.

### **Identified Barriers to Cervical Cancer Screening:**

Members:

- May not be aware that Pap smears are a covered benefit
- May not have accurate information about screening recommendations
- May be concerned about the potential for discomfort and/or embarrassment associated with the Pap smear procedure

Physicians:

- May not routinely recommend Pap smears to their patients
- May not have a systematic method to track preventive services
- May not consistently code visits at which a Pap test was performed with a qualifying code specific to the service

IPAs:

- May not have submitted complete encounter data

- Encounter data may not have included lab vendor data
- May not have a method to motivate their physicians to improve care

**Interventions Implemented to Address Identified Barriers:**

Members:

- Provided online resources, including Personal Health Manager and Ask a Nurse
- During their birthday month, mailed the “*Make an Investment in Your Health ...You’re Worth It*” reminder cards to women age 18-369 without claims/encounter documentation of recent cervical cancer screening, and women age 40-69 without claims/encounter documentation of recent breast cancer screening and cervical cancer screening. The reminders:
  - provide information on the screening recommendations for Pap smear
  - inform members that Pap smears are a covered benefit when ordered by their PCP or WPHCP
  - encourage members to contact their PCP or WPHCP for preventive services

<b>BCBSIL Cervical Cancer Screening Member Outreach</b>	
<b>Project Year</b>	<b>Number of Members</b>
2008	237,195

Physicians/IPAs:

- Made a QI Fund payment to IPAs for completion of cervical cancer screening physician and member outreach
- Updated and distributed the BCBSIL Preventive Care Guideline
- The physicians and WPHCPs in 78 IPAs were provided a list of members due for cervical cancer screening
- BCBSIL encouraged PCPS and WPHCPs to recommend preventive care services to their members
- BCBSIL provided IPAs with a tool to identify populations for outreach based on eligibility and administrative data
- BCBSIL motivated IPAs to develop systems to perform outreach
- Conducted QI Forums and onsite/in house one-on-one trainings for several IPAs
- Reviewed and distributed the brochure “The Importance of a Pap Test” to the IPAs
- Provided trainings on the use of the preventive care module in the D2 Web-based tool
- Conducted HMO QI Fund Training for the IPAs in March 2008
- Reviewed best practices for physician and member outreach at a quarterly QI Forum
- Hosted a vendor fair in December 2008 at which IPAs could receive information about programs that are available to help with outreach efforts and tools for tracking and trending data

The IPAs were required to consult with their physicians to develop the IPA plan for outreach. It is anticipated that concentrating on member and physician outreach in 2008 will have a favorable impact on cervical cancer screening and there will be improvement in the 2008 cervical cancer screening rate.