



Every Woman Matters Programmatic Update

*A Publication of the Nebraska Every Woman Matters Program
November 2008*

Important Information for Clinicians, Nurses & Office Staff

Three New Cervical Policies “Effective December 2008”

Approved by the Every Woman Matters Medical Advisory Committee

POLICY 1: Cervical Cancer Screening

The cervical screening guidelines for clients enrolled in the Every Woman Matters Program (EWM) will be as follows:

- **ONLY biennial (every 2 years)** cervical cancer screening with **Conventional Pap tests** or **Liquid-Based cytology** for clients with normal/benign results.
- In order for EWM to reimburse **every year** for a conventional or liquid-based Pap test, client must meet one of the following criteria: *
 - Most recent Pap test was abnormal (ASC-US or greater)
 - Compromised Immune System (from HIV infection, organ transplant, chemotherapy or chronic steroid use)
 - Intrauterine DES exposure
 - History of Invasive Cervical Cancer

*Criteria determined by Centers for Disease Control and Prevention (CDC), EWM funder

Note: The new Screening Visit Card sent to clients will have the current label with ID information. The date of the last reported Pap test she had through EWM, test results and if the Pap was conventional or liquid-based will be indicated on the label.

- EWM Medical Advisory Committee strongly recommends liquid-based cytology. Liquid-based cytology was used for 79% of the 6,486 Pap tests performed in the past year for EWM clients.

Reminders:

- EWM Medical Advisory Committee strongly recommends an annual pelvic exam be performed on all clients, even if a Pap test is not indicated. Within the context of EWM, pelvic exams are only reimbursable when done as part of an office visit in which the client receives a clinical breast exam and/or a biennial Pap test.
- EWM will NOT reimburse for a Pap test if client has had a hysterectomy (with cervix removed) for benign reasons.

POLICY 2: Management of Women with Cervical Cytological Abnormalities

The Centers for Disease Control and Prevention (CDC), Every Woman Matters Program (EWM) funder, requires the program to have evidence-based recommendations regarding management of cervical cytological abnormalities.

EWM will follow the American Society for Colposcopy and Cervical Pathology (ASCCP) “2006 Consensus Guidelines for the Management of Women with Cervical Cytological Abnormalities.”

We are aware that clinicians may already follow this standard of practice for their clients as the 2006 guidelines were introduced in October 2007. Until now, EWM has been following the 2001 ASCCP guidelines.

Resources:

- **A description of the guidelines in line-by-line text recommendations** was published in the American Journal of Obstetrics and Gynecology (October 2007; 346-355). The **article and copies of the 2006 algorithms** are available to download under consensus guidelines for the management of women with cytological abnormalities on the ASCCP web site www.asccp.org.
- 2006 ASCCP **cytological algorithms pocket guide** was sent with this provider update to the EWM program contact in each clinic. Additional pocket sized 2006 algorithm booklets are also available for order at www.asccp.org.

Note - Important:

- EWM will **NOT** pay for HPV testing at the same time as the screening Pap test **UNLESS** that Pap test indicates ASC-US results. This is based on CDC’s reimbursement policy.
- If the 2006 ASCCP guidelines indicate cytology at 6 months and 12 months **or** HPV testing at 12 months, EWM will **ONLY** pay for HPV testing at 12 months.
- No 3-month Pap test surveillance/follow-up are indicated in the 2006 ASCCP guidelines, therefore EWM will **NOT** pay for these Pap tests.
- EWM Medical Advisory Committee strongly encourages HPV testing as follow-up to **all** screening Pap test results of **ASC-US**.
 - If HPV results are negative, follow-up is not needed. The client can resume routine screening according to 2006 ASCCP algorithms.
 - EWM will reimburse a return office visit for HPV testing if the client had a conventional Pap with ASC-US results, funded by EWM in last 3 months.
 - A total of 246 ASC-US Paps for clients 40 and older were reported during the past year. Only 52 of these reported received HPV testing.

Revised Forms: The program forms have been revised with the new cervical screening policies as well as the 2006 ASCCP guidelines.

Note: **A limited number of the revised forms have been sent with this provider update to the clinic EWM program contact. The clinic should start using the forms immediately.**

- Good News - We have listened to provider’s request to decrease the number of program forms. This was accomplished by integrating CDC requirements and the recommendations from the EWM Medical Advisory Committee.

(Please See Reverse Side)

- Three forms have been combined (cervical diagnostic enrollment form, cervical follow-up and treatment plan and the gray screening visit follow up card) into ONE form, now called “Cervical Diagnostic Enrollment/Follow-Up & Treatment Plan”.
 - The new form follows the 2006 ASCCP guidelines. It also **reflects allowable reimbursement** based on the recommendations of the EWM Medical Advisory Committee to deliver the most cost effective public health program. Form example: Pap result of ASC-H in Section 1, straight across to the right in Section 2 is the appropriate diagnostic workup for ASC-H Pap.
- There will no longer be blue, salmon, green or purple screening cards; only an ivory colored screening card.
- All NEW and REVISED forms will have an 8/08 version date. If a form does not have an 8/08 date then they can be recycled.
- The Presumptive Eligibility Enrollment form (utilized for clinic staff to enroll clients in EWM) has also been revised. The form also contains the information found on the Screening Visit Card.

Policy 3: Management of Women with Cervical Histological Abnormalities

The Centers for Disease Control and Prevention (CDC), Every Woman Matters Program (EWM) funder, requires the program to have evidence-based recommendations regarding management of cervical histological abnormalities.

EWM will follow the American Society for Colposcopy and Cervical Pathology (ASCCP) “2006 Consensus Guidelines for the Management of Women with Cervical Histological Abnormalities.”

Resources:

- **A description of the guidelines in line-by-line text recommendations** was published in the American Journal of Obstetrics and Gynecology (October 2007; 340-345). The **text from the article and copies of the algorithms** are available to download under consensus guidelines for the management of women with cervical intraepithelial neoplasia or adenocarcinoma in situ on the ASCCP web site www.asccp.org.
- 2006 ASCCP **histological algorithms pocket guide** was sent with this provider update to the EWM program contact in each clinic. Additional copies of the pocket sized 2006 algorithms booklet are available for order at www.asccp.org.