

Cervical Cancer Screening and Diagnostic Services among Program Eligible Women in Nebraska (1992-2023)

Cervical cancer screening can effectively prevent cervical cancer by finding and treating pre-cancers.¹ With regular screening tests and follow-up, cervical cancer is highly curable if found and treated early.² U.S. Preventive Task Force found convincing evidence that routine Pap Smears alone, routine HPV testing for high-risk HPV types alone, or in combination of them both at the same time (Co-testing) can effectively detect precancerous cervical lesions and cervical cancer.³

ABOUT THE PROGRAM:

The Nebraska Breast and Cervical Cancer Early Detection Program, called Every Woman Matters (EWM), has provided breast and cervical cancer screening services since 1992. In the past 30 years, the program has enrolled and served 88,025 women; 72,690 women were provided with 151,773 Pap Smears or HPV tests or combination of both and 14,978 diagnostic services as well as patient navigation services.

This federally funded program pays for office visits associated with Pap Smears, Human Papillomavirus (HPV) test, and laboratory exams. It also provides diagnostic services when abnormal results are detected. Nebraska implemented the Medicaid Treatment Act in 2001, allowing woman diagnosed with breast or cervical cancer to be referred to Medicaid for treatment.

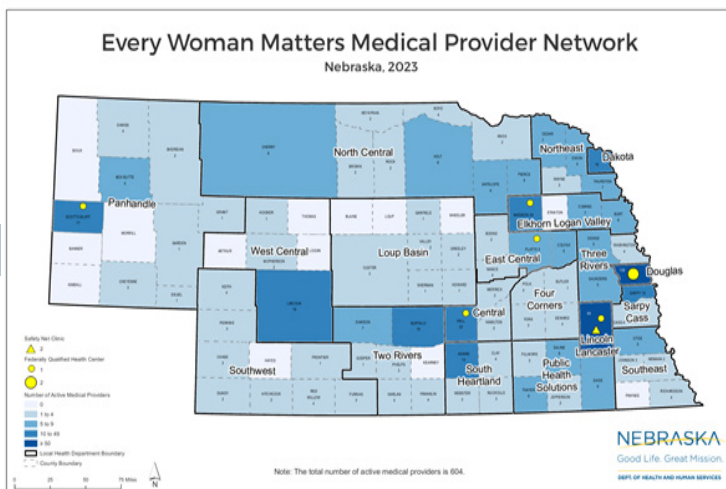
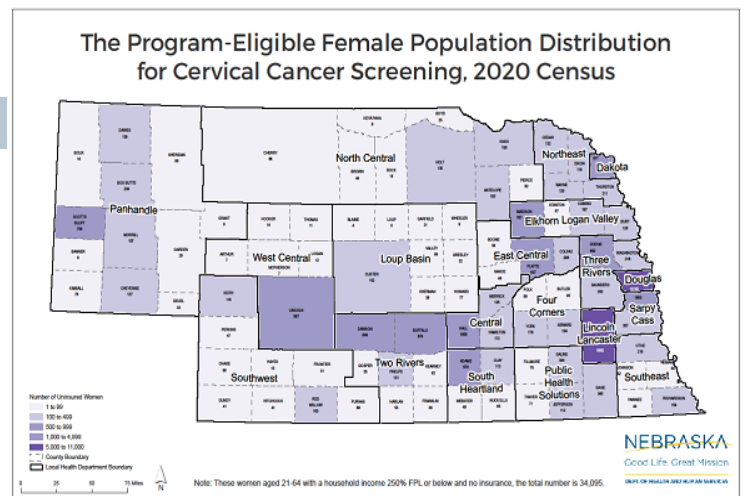
To learn more about the program, please visit: <https://dhhs.ne.gov/EWM>.

Program Eligibility

The current eligibility is women aged 21-64 with household incomes at or below 250% of the federal poverty level, and with no health insurance. More eligibility and enrollment information can be found at: <https://dhhs.ne.gov/EWM> or by calling EWM at 800-532-2227 or sending an email to: dhhs.ewm@nebraska.gov.

Current program-eligible population distribution

According to 2020 Census data, currently around 34,095 potential program-eligible women reside in Nebraska (See Figure 1).



Current provider network

The program has 604 active medical providers across the entire state, including all 7 federally qualified health centers and some safe net primary care clinics. These providers are OBGYN, primary care providers, and laboratories (See Figure 2).

Screening Services

In the past 30 years, there were 151,773 Pap Smears or HPV tests or Co-test of Pap Smears and HPV tests that were provided to 68,277 women.

Due to eligibility criteria, some women could have only one cervical screening service while others could have more than once cervical screening services.

Most women were Non-Hispanic White (69%), followed by Hispanic (20%), Non-Hispanic African American (6%), Non-Hispanic Native American (2%); Non-Hispanic Asian, Non-Hispanic Multiracial, and unknown account for 1%, respectively (See Figure 3).

Approximately 66% of women were under 50 years old, 4% were older than 65 (See Figure 4). More than half (72%) lived in Metropolitan and Micropolitan areas (See Figure 5).

Figure 3. Racial/Ethnic Distribution Among Women Screened for Cervical Cancer, 1992-2023

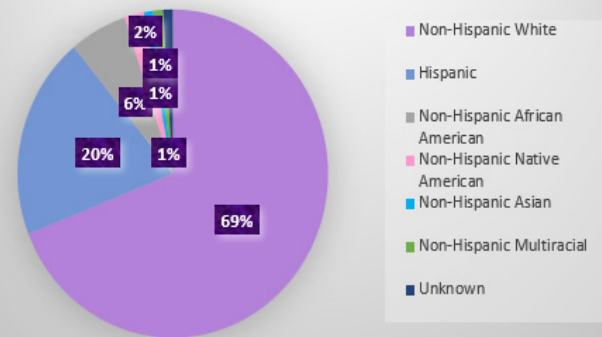


Figure 5. Geographic Distribution Among Women Screened for Cervical Cancer, 1992-2023

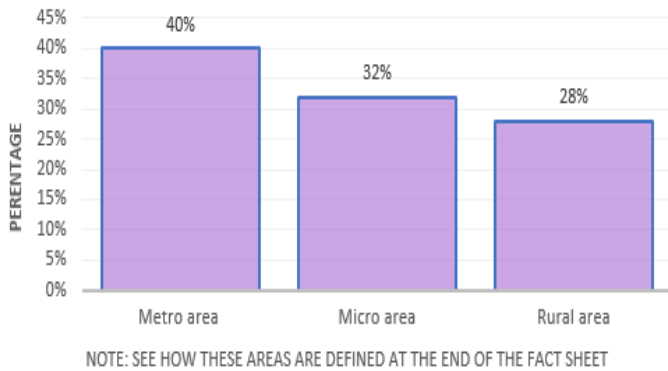
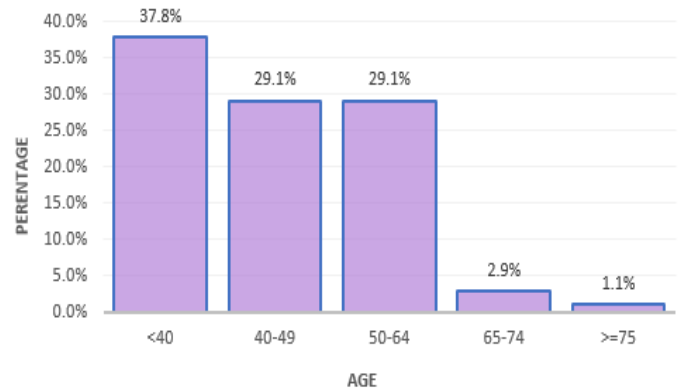


Figure 4. Age Distribution Among Women Screened for Cervical Cancer, 1992-2023

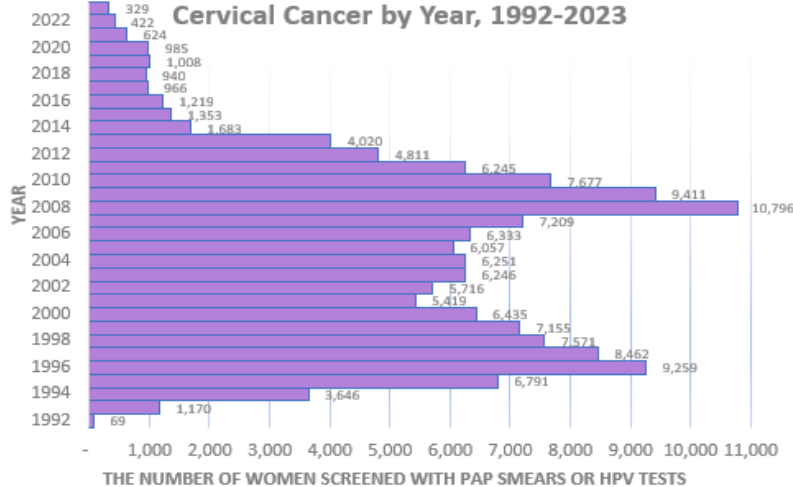


Policy changes and eligibility criteria changes have contributed to the changes in the number of women screened by year (See Figure 6).

These changes were:

- citizenship and legal status requirement implemented in 2012.
- Affordable Care Act implemented in 2013.
- National screening guideline changes from annual screening to every 3 years for Pap Smears (cervical screening) in 2014.³
- Nebraska Medicaid extension in 2020.

Figure 6. The Number of Women Screened for Cervical Cancer by Year, 1992-2023



Diagnostic Services

When an abnormal result is found by Pap Smears and/or HPV tests, further follow-up is needed to determine what treatments are necessary to treat the conditions. These additional procedures also called diagnostic services include more than 50 procedures, for example, Colposcopy, biopsy, polyp removal, etc., according to the program manual. There were 14,978 diagnostic services provided to 12,112 women who had abnormal screening results.

Some women received the diagnostic services after a Pap Smears or HPV test was performed by in network providers and paid by the program. Some women whose Pap Smears or HPV test was abnormal and not paid by the program were referred by their providers due to their insurance coverage and financial hardship.

Some women received more than one diagnostic services. These women's demographic distributions were shown in Figure 7, 8, and 9.

For the cervical diagnostic services, 77% of women were younger than 40 (See Figure 8) and 79% resided in Metropolitan and Micropolitan areas (See Figure 9).

Figure 7. Racial/Ethnic Distribution Among Women Having Cervical Diagnostic Services, 1992-2023

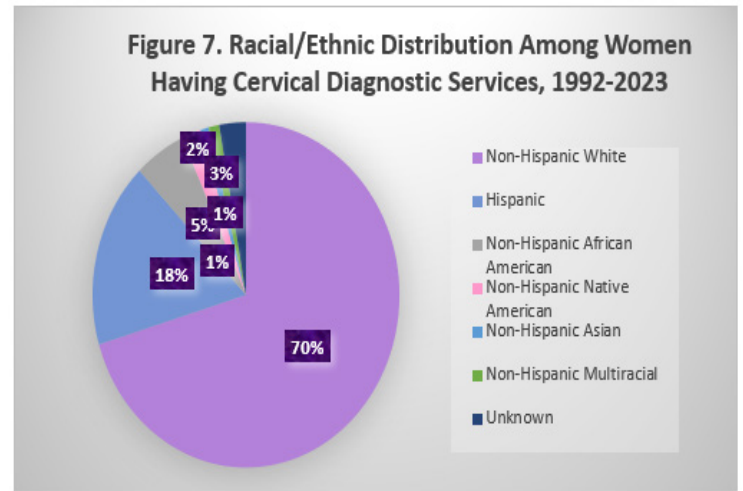


Figure 8. Age Distribution Among Women Having Cervical Diagnostic Services, 1992-2023

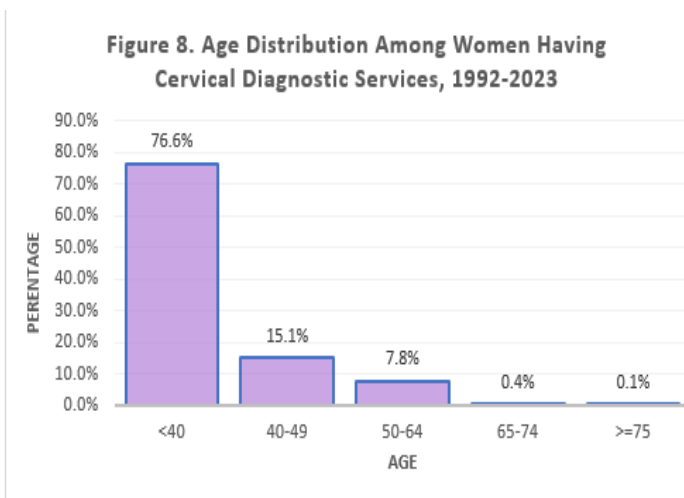
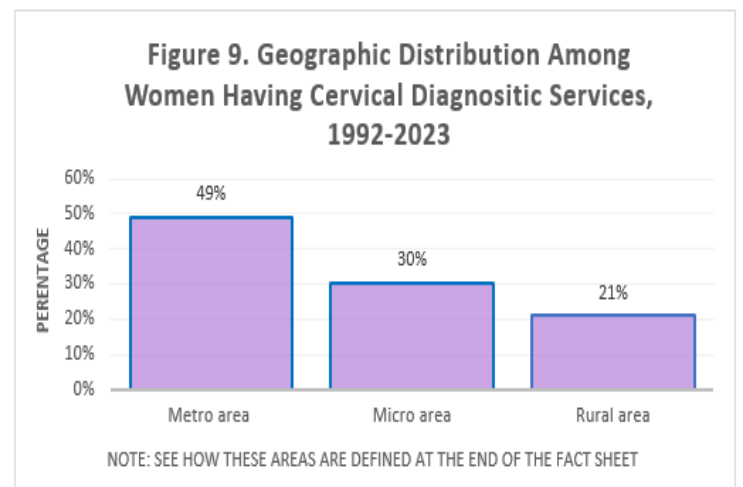
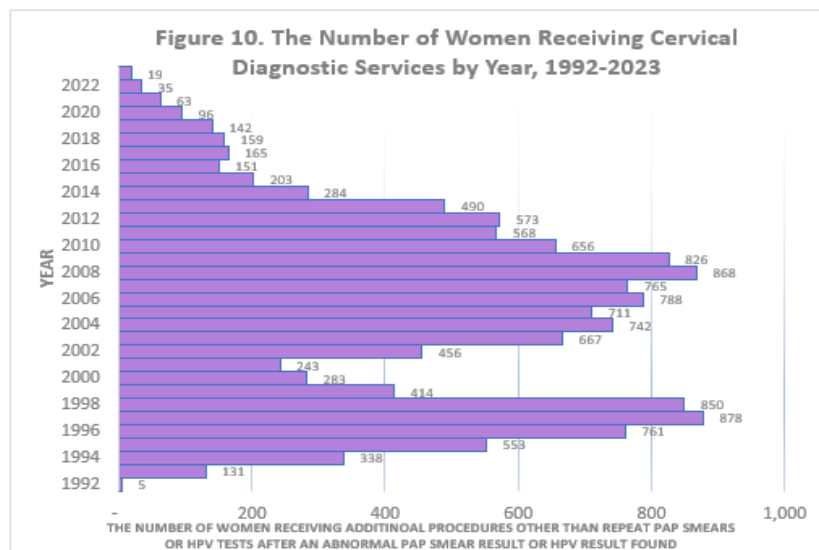


Figure 9. Geographic Distribution Among Women Having Cervical Diagnostic Services, 1992-2023



Policy changes and eligibility changes over time also contributed to the changes in the number of women who received cervical diagnostic services by year (See Figure 10).

Figure 10. The Number of Women Receiving Cervical Diagnostic Services by Year, 1992-2023

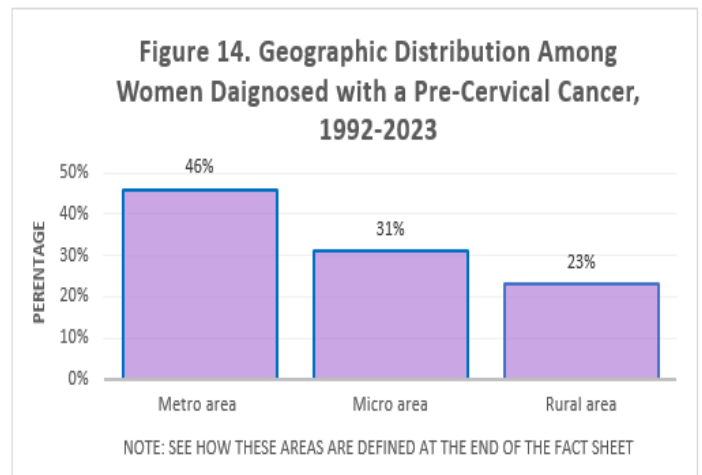
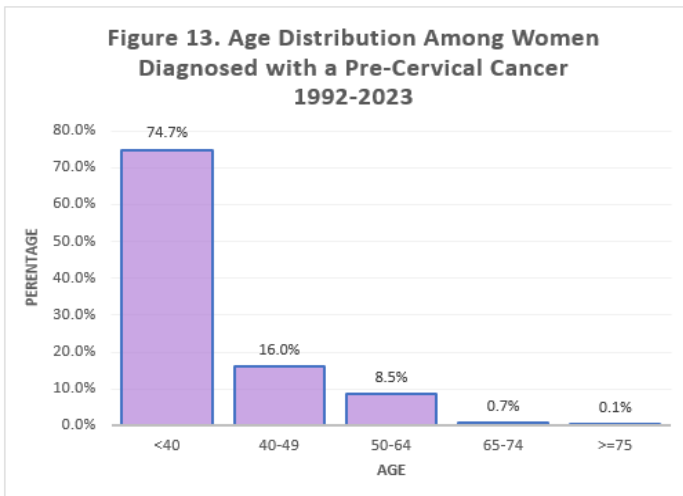
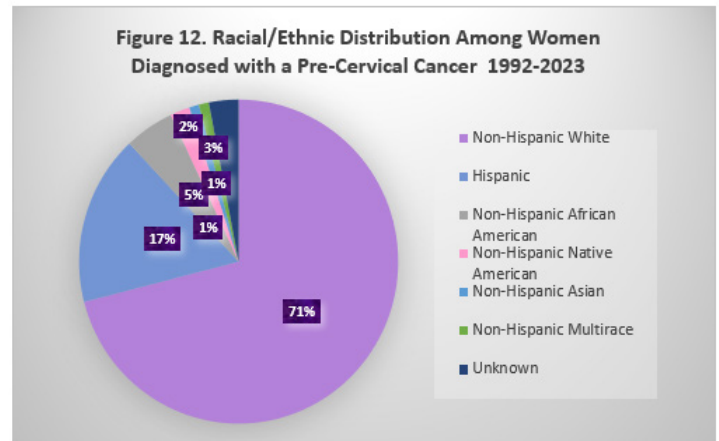


Pre-cancer and cancer detected and treated

According to the latest 2023 national cancer report⁴ and 2019 state cancer report⁵, the cervical cancer incidence and mortality rates are much lower than breast cancer and other cancers. The main reason is because most cervical precancers can be detected by Pap Smears and/or HPV tests and promptly and effectively treated after the diagnosis. In the past 30 years, there were 3,694 women who were diagnosed with cervical precancers but only 99 women who were diagnosed with an invasive cervical cancer.

Among the 3,694 women, 71 % were Non-Hispanic White (See Figure 12), 75% were those under 40 (See Figure 13), and 77% resided in Metropolitan and Micropolitan areas (See Figure 14).

Most of the women with an invasive cervical cancer were sent to Medicaid for treatment. For those who didn't go through Medicaid, the program helped them to find other resources to cover their treatments.



RESOURCES:

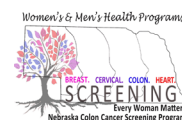
1. American Cancer Society. <https://www.cancer.org/cancer/types/cervical-cancer/causes-risks-prevention/risk-factors.html>.
2. Centers for Disease Control and Prevention. <https://www.cdc.gov/cervical-cancer/risk-factors/index.html>.
3. U.S. Preventive Services Task force. <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/cervical-cancer-screening>.
4. American Cancer Society. <https://www.cancer.org/cancer/types/cervical-cancer/detection-diagnosis-staging/cervical-cancer-screening-guidelines.html>.

REFERENCES:

1. American Cancer Society. <https://www.cancer.org/cancer/types/cervical-cancer/causes-risks-prevention/prevention.html>. Accessed on July 25, 2024.
2. Centers for Disease Control and Prevention. https://www.cdc.gov/cancer/cervical/pdf/cervical_facts.pdf. Accessed on July 25, 2024.
3. U.S. Preventive Services Task Force. <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/cervical-cancer-screening>. Accessed on August 1, 2024.
4. American Cancer Society. <https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/2023-cancer-facts-figures.html>. Accessed on September 9, 2024.
5. Cancer Incidence and Mortality in Nebraska, 2019. <https://dhhs.ne.gov/Cancer%20Registry%20Documents/Cancer%20Incidence%20and%20Mortality%20in%20Nebraska%20202019.pdf>. Accessed on September 9, 2024.

Note: The geographic classification is from 2016 State Health Assessment Report. Metro area refers to metropolitan core county where it contains a city with more than 50,000 residents, plus its outlying counties; these counties are Douglas, Sarpy, Cass, Saunders, Washington, Lancaster, Seward, Dixon, and Dakota. Micro area refers to micropolitan core county where it contains a city with more than 10,000 residents; these counties are Scottsbluff, Lincoln, Dawson, Buffalo, Hall, Adams, Madison, Platte, Dodge, and Gage. The rest of all counties is the rural area.

Nebraska Department of Health and Human Services || Division of Public Health
 Women's and Men's Health Programs
 Every Woman Matters
 301 Centennial Mall South || P.O. Box 94817 || Lincoln, NE 68509-4817
 EMAIL: DHHS.ewm@nebraska.gov || PHONE: 800-532-2227 || WEBSITE: www.dhhs.ne.gov/EWM



NEBRASKA
 Good Life. Great Mission.
 DEPT. OF HEALTH AND HUMAN SERVICES

December 2024