



*Breast***Care**
awareness & action

FY2008

JULY 1
2007
— THROUGH —
JUNE 30
2008

STEPPING UP FOR ARKANSAS WOMEN



We have known for decades that early detection is the best weapon against breast and cervical cancer. Until the Breast Cancer Act of 1997 was passed by the Arkansas General Assembly, too many Arkansas women did not have access to screening services because they either had no health insurance or the insurance they had did not cover screening. Recognizing that outcomes were far worse for these women, the Governor's Breast Cancer Control Advisory Board established program guidelines that would assure breast and cervical cancer screening and treatment services were available to underserved women in our state.

There are still more than 30,000 eligible Arkansas women who have not enrolled in the program. As funding sources continue declining, we are concerned that our capacity to educate, enroll, screen, diagnose and treat Arkansas women will also decline.

In 2008, we were heartened to see that for the third year in a row, when women get annual mammograms through BreastCare, the chances are great that if there is a diagnosis of breast cancer, it will be detected in an early stage when it is most successfully treated. We hope this very significant trend will illustrate the value of early detection in helping keep healthcare expenditures down and women's health high on the priority list.

SAYING “YES” IS STILL THE MESSAGE



BreastCare asks all Arkansas women to say “YES” to annual breast and cervical cancer screenings. For those women who meet program requirements, BreastCare makes free annual breast and cervical cancer screenings possible through over 2,000 providers in more than 160 towns and cities across Arkansas. Women who qualify for the program and have already been diagnosed with breast or cervical cancer can also receive treatment through BreastCare.

To Qualify, a Woman Must:

- Be an Arkansas resident 40 years of age or older
- Have an income at or below 200% of the federal poverty level
- Have no health insurance or insurance that does not cover breast and cervical cancer screenings

It All Begins with a Phone Call

When women say “YES” by calling the BreastCare toll-free number, 1-877-670-CARE, they are taking the first step toward promoting their own good breast and cervical health. The center takes calls Monday through Friday from 8 a.m. until 4:30 p.m. Women who qualify are enrolled in BreastCare and scheduled for an initial clinical breast exam and Pap test with a BreastCare provider in their area. The call center operators provide women who do not qualify for a free mammogram with information about low-cost screening and other resources that may be available to them. BreastCare operators also answer general questions about risk factors, screening and treatment procedures.

Although most women in BreastCare receive normal results from their mammograms and Pap tests, our regional care coordinators follow up with those who get abnormal results. Should the follow-up result in a diagnosis of breast or cervical cancer, our care coordinators help those women navigate through the treatment process and beyond.

THE BOTTOM LINE IN 2008

48,140

women eligible to receive services

14,962

women enrolled

5,342

new enrollees

136,039

calls processed

14,733

women screened

14,464

mammograms performed

6,080

Pap tests performed

289

cases of breast or cervical cancer diagnosed and/or treated*

\$4,443,755

spent on screening, diagnostic and treatment services

SINCE FEBRUARY 1999

989,489

calls processed

114,523

mammograms performed

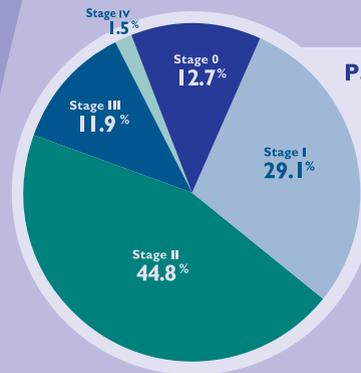
57,430

Pap tests performed

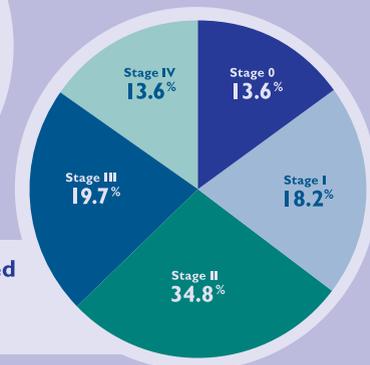
1,989*

cases of breast or cervical cancer diagnosed and/or treated

*Some women were enrolled into the program to receive treatment for a cancer diagnosed outside of BreastCare. Excludes women with a diagnosis of pre-cervical cancer.



Patients Screened & Diagnosed WITHIN BreastCare



Patients Screened & Diagnosed OUTSIDE BreastCare and treated by BreastCare

Early Detection = Early Treatment

When breast cancer is detected early, it is more successfully and economically treated. Year after year, we find that women who participate in BreastCare and are subsequently diagnosed with breast cancer have earlier stage cancers than women who enroll in the program after they have received a breast cancer diagnosis. Early detection is the key. BreastCare is making breast cancer screening an annual, lifesaving option for thousands of Arkansas women each year.

Where the Money Goes

Clinical services account for the largest share of BreastCare's \$6.67 million budget for 2008.[†] Fully 68% went for screening, diagnosis and treatment services.



[†] prepared Nov. 17, 2008

MDE Performance Indicators

The Centers for Disease Control and Prevention (CDC) provides a set of standards to the state grantees of National Breast and Cervical Cancer Early Detection Program (NBCCEDP). These standards apply to the routine data collection of 11 core clinical indicators on women who are served by the state programs. For the first time in April 2008, BreastCare met the standards of all 11 clinical indicators. The program has also made great strides in improving follow-up activities of abnormal cervical cancer screenings and meeting that CDC standard.

CORE PROGRAM PERFORMANCE INDICATORS			ARKANSAS RESULTS		Nationwide Combined Results	
Indicator Type	Program Performance Indicator	CDC Standard	Percentage	Standard Met?	Percentage	Standard Met?
Screening	Initial Program Pap Tests; Rarely or Never Screened	≥ 20%	31.5%	YES	25.5%	YES
	Screening Mammograms Provided to Women > 50 Years of Age	≥ 75%	93.1%	YES	83.6%	YES
Cervical Cancer Diagnostic Indicators	Abnormal Screening Results with Complete Follow-Up	≥ 90%	87.5%	YES	91.6%	YES
	Abnormal Screening Results; Time from Screening to Diagnosis > 60 Days	≤ 25%	30.0%	YES	31.3%	NO
	Treatment Started for Diagnosis of HSIL, CIN II, CIN III, CIS, Invasive	≥ 90%	93.8%	YES	91.8%	YES
	HSIL, CIN II, CIN III, CIS; Time from Diagnosis to Treatment > 90 Days	≤ 20%	0.0%	YES	7.9%	YES
	Invasive Carcinoma; Time from Diagnosis to Treatment > 60 Days	≤ 20%	0.0%	YES	12.5%	YES
Breast Cancer Diagnostic Indicators	Abnormal Screening Results with Complete Follow-Up	≥ 90%	92.5%	YES	93.7%	YES
	Abnormal Screening Results; Time from Screening to Diagnosis > 60 Days	≤ 25%	14.7%	YES	12.6%	YES
	Treatment Started for Breast Cancer	≥ 90%	97.7%	YES	97.4%	YES
	Breast Cancer; Time from Diagnosis to Treatment > 60 Days	≤ 20%	6.0%	YES	6.0%	YES

2008 Josetta Wilkins Award Winners

Each year the Josetta Wilkins Award recognizes one volunteer, one professional and one organization demonstrating outstanding achievement in breast cancer education, research, advocacy, treatment or support.

The recipient for individual volunteer, **Francesica Kelley**, is a two-time breast cancer survivor, author and National Chairperson for the Witness Project. The award for professional individual went to the BreastCare Care Coordination Team of **Polly Lockett-Fox** (North Little Rock), **Fran Kirk** (Forrest City), **Lisa Martin** (Paragould), **Debby Harris** (Russellville) and **Julie Huntley** (Texarkana). The award for outstanding organization went to **Washington Regional Cancer Support Home** in Fayetteville.



Dr. Josetta Wilkins (center), whose tireless efforts as a breast cancer advocate in the Arkansas legislature ultimately resulted in the creation of BreastCare, is pictured with her son, Sen. Henry "Hank" Wilkins IV (left) and Dr. James Y. Suen.

BETTER OUTCOMES FOR ARKANSAS WOMEN



A Good Investment with Healthy Dividends

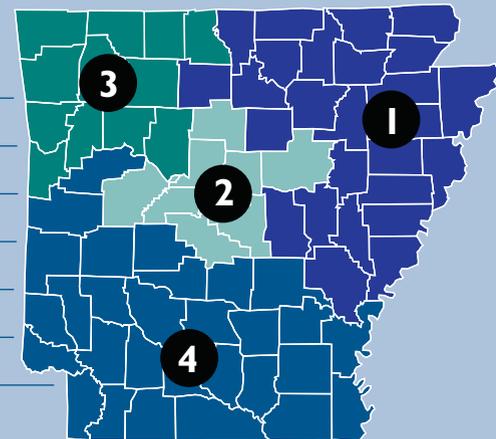
We are all well served by programs that provide much needed services in a cost effective manner. Relative to national programs, BreastCare does a good job of delivering cost effective screening and diagnostic services to underserved and low-income women in Arkansas.

Twice the Value

More than \$4.4 million was spent on covered services that were valued at \$10.4 million. BreastCare was able to leverage its budget so that for every \$1 spent, the program received \$2.34 in services from providers. Women in every corner of our state benefit from the dollars spent on breast and cervical cancer screening and treatment.

BREASTCARE NUMBERS PER CONGRESSIONAL DISTRICT

	1st District	2nd District	3rd District	4th District
Total State Funds Spent	\$416,398	\$521,265	\$367,849	\$301,968
Total Federal & State Funds Spent	\$2,290,754	\$2,644,275	\$1,814,038	\$2,113,816
Counties in District	26	8	12	29
Women Eligible for Services ¹	11,314	10,302	13,676	12,848
Clients Served ²	6,643	6,040	3,904	5,657
Clients with Cancer Diagnosis ³	141	83	97	134
BreastCare Providers	376	762	395	322



¹ Small Area Health Insurance Estimates/County and State by Demographic and Income Characteristics/2005, US Census Bureau.

² Women who receive services in more than one congressional district may be counted more than once. Numbers do not include women served by providers in other states or in bordering cities. BreastCare DSS, Data Analysis Universe.

³ These figures include clients diagnosed with pre-cervical cancer and represent clients enrolled in Medicaid category 07 with Medicaid begin dates between 7/01/07 and 6/30/08, DHS BCC Listing.

GRANT MONEY MAKES A DIFFERENCE

Bridging the Gap

Funds available for screening and diagnosis of breast cancer are declining. Without the help of Susan G. Komen for the Cure, Inc. and the UAMS Foundation, many Arkansas women without adequate health insurance would have fallen through the cracks. The UAMS Foundation and Komen Arkansas and Ozark Affiliates provided grants for “Bridging the Gap in Screening” that funded mammograms, clinical breast exams and diagnostic procedures for over 1,800 women in all 75 counties who would not have otherwise received services.

Pink Carnation Sunday

Since 2000, Pink Carnation Sunday’s goal has been to increase awareness and educate women 40 and older about breast cancer and the importance of getting an annual mammogram and clinical breast exam. Thanks to a \$10,000 grant from the Komen Arkansas Affiliate, volunteers trained by BreastCare and representing 177 faith-based organizations, once again went into minority churches across the state presenting pink carnations to women pledging to get a mammogram during the year.

Esperanza y Vida & BreastCare: A Winning Partnership

Esperanza y Vida, providing breast and cervical cancer health education and outreach to the Latino community, has been a BreastCare partner since 2006. Esperanza y Vida’s staff assists with navigation services for Spanish-speaking participants by arranging appointments, conducting counseling, following up on abnormal results and assuring treatment is available when needed. BreastCare funds a part-time position in northwest Arkansas. Two additional positions are funded through the American Cancer Society.

REACHING OUT TO UNDERSERVED GROUPS

Tell a Sister Targets Cervical Cancer Awareness

The Cervical Cancer Task Force, Arkansas Representative Wilhelmina Lewellen and Alpha Kappa Alpha sorority joined forces to promote awareness and early detection of cervical cancer by launching the grassroots *Tell a Sister* campaign. As part of the sorority’s 100th anniversary celebration, members took *Tell a Sister* toolkits containing cervical cancer public service announcements and other educational materials out into their communities to spread the word about the importance of annual cervical cancer screening.



THE BREASTCARE TEAM

When it comes to the nuts and bolts of making BreastCare work for the thousands of women across the state, the BreastCare Team is first rate. From education and training to managing countless provider contracts, the BreastCare Team keeps everything moving toward the goal of serving Arkansas's uninsured and underinsured women.

Barabara Hager, MPH Program Director	Tina Patterson, RN Program Nursing Coordinator	Rupa Sharma, MSPH, MSc Senior Epidemiologist	Carol Middleton Budget Coordinator
Louise Scott Program Administrator	Tatiana Swanigan Health Educator	Bamidele Olaleye Data Manager	Wanda Lung'aho Administrative Assistant
Becky Kossover, MA, CVM Contracts and Grants Coordinator	Adam Nelsen Case Manager	Kenesha Carbage Medical Records Technician	Letha Bell Administrative Assistant
Dianne Crippen, RN Program Nursing Coordinator	Linda Wilson Minority Outreach Specialist	Shiela Kelley Accountant	

CARE COORDINATORS

Our Care Coordinators work with BreastCare clients and function as liaisons between the Arkansas Department of Health and the local providers who perform the screening and treatment. They also provide education and outreach to existing and potential BreastCare providers.

Debby Vodrazka Harris, RN Northwest Region	Lisa Martin, RN Northeast Region	Polly Lockett-Fox, RN Central Region
Julie Huntley, RN Southwest Region	Fran Kirk, RN Southeast Region	

BREAST CANCER CONTROL ADVISORY BOARD

Tammy Gavin, Board Chair White River Medical Center Batesville, Arkansas — REPRESENTING — Arkansas Hospital Association <i>Term expires Jan. 1, 2013</i>	Barbara Daugherty Little Rock, Arkansas — REPRESENTING — Susan G. Komen for the Cure <i>Term expires Jan. 1, 2012</i>	Hershey Garner, MD Highlands Oncology Group Fayetteville, Arkansas — REPRESENTING — Radiation Oncology <i>Term expires Jan. 1, 2009</i>	Laura Hutchins, MD University of Arkansas for Medical Sciences – Little Rock, Arkansas — REPRESENTING — American Cancer Society <i>Term expires Jan. 1, 2013</i>
Sondra Bedwell, RN, MNCS, FNP University of Arkansas for Medical Sciences, AHEC-SW Texarkana, Arkansas — REPRESENTING — Arkansas Nursing Association <i>Term expires Jan. 1, 2012</i>	Jerri Fant, MD Breast Health Clinics of Arkansas — REPRESENTING — Arkansas Medical Society <i>Term expires Jan. 1, 2011</i>	Ronda Henry-Tillman, MD University of Arkansas for Medical Sciences – Little Rock, Arkansas — REPRESENTING — Medical Oncology <i>Term expires Jan. 1, 2012</i>	Mary Lou Wilson, RN Fayetteville, Arkansas — REPRESENTING — Women's Health Advocacy <i>Term expires Jan. 1, 2011</i>

