

Breast Cancer Control Advisory Board

Regular Quarterly Meeting

January 28, 2014

Minutes

Attending Board Members:

Dr. Ronda Henry-Tillman, Sarah Faitak, Dr. Jerri Fant, Dr. Hope Keiser, Dr. John Lynch (via teleconference), Sharon Parrett, Alicia Storey (via teleconference) and Debra Walden, (via teleconference).

Absent Board Members:

None

Arkansas Department of Health (ADH):

Alysia Cover, Kay Creighton-Hays, Joanne Jones, David Kern, Polly Lockett-Fox, Geray Pickle, Cheryl Roland, Reginald A. Rogers. and Brandy Sutphin.

Other Organizations:

Royce Pinkard and Jeremy Fleckenstein (Hewlett Packard Enterprise)
Heather Bailey, Lisa Bondurant and Holly Frein (The Communications Group)
Laprisha Bennett (The Witness Project)

I. Call to order:

Dr. Ronda Henry-Tillman, Board Co-Chair, called the meeting to order at 5:00 p.m.

II. Welcome and Introductions:

Joanne Jones reminded attendees in the room to identify themselves and speak loud enough so that attendees via teleconference would be able to hear the discussion. Dr. Henry-Tillman suggested it, and individuals present in the conference room and by teleconference identified themselves. Dr. Henry-Tillman thanked Michelle Snortland on behalf of the board for the work she did as BreastCare Program Director. Michelle accepted a promotion to become Chief of the ADH Tobacco Prevention and Cessation Branch.

III. Comments from members of the public

There were no comments from the public.

II. Board Business

A. Review and Approval of Minutes from December 10, 2013

Debra Walden made a motion to approve the minutes from December 10, 2013, meeting and Sharon Parrett seconded the motion. The motion to approve the minutes was approved unanimously and without discussion.

B. Review of State Program Income and Expenditure for FY2014 Second Quarter ending December 31, 2013

Joanne Jones, Interim BreastCare Program Director, reviewed the expenditure report for July 1, 2013, through December 31, 2013. Expenditures for December totaled \$112,110 and for Fiscal Year 2013-2104, including the first two quarters totaled \$988,021. Ms. Jones noted that \$3,482,650 has been budgeted for the fiscal year and that in the first two quarters \$1,607,232 has been spent, with \$1,875,418 remaining in the budget, which translates into 50 percent of the fiscal year is completed and that 46 percent of the program's budgeted funds had been spent. Debra Walden asked if there was any variation in the spending, and Ms. Jones said the program "was exactly on target."

Ms. Jones called attention in the board packet to the BreastCare Fiscal Year 2014, Second Quarter Report, which is on the ADH BreastCare web page along with the First Quarter FY 2014 Report. The report showed a year-to-date total of 6,337 women enrolled, including 2,763 funded by federal grants, 2,982 funded by state money and 592 by Komen grants. Ms. Jones noted that at the enrollment pace for the first six months, the BreastCare Program is on track to enroll more than 12,000 women this year, compared to 11,640 enrolled last fiscal year.

C. BreastCare Quarterly and Enrollment Reports

Cheryl Roland, BreastCare Program Data Manager, discussed the number of slots used and remaining by plans. She said a slot equals an enrollee and the slots are broken down by plan as well. (The plans are: Plan A, Plan C, Plan D, Plan KA (Komen Arkansas); Plan KO (Komen Ozark) and Plan KT (Komen Texarkana).

Dr. Henry-Tillman asked why AHEC (Area Health Education Centers) were not on the list. Ms. Roland said they did not renew their contract to provide the services.

Sarah Faitak asked why there were only six slots used by Plan KO (Komen Ozark) in December. Ms. Roland said more slots have been added and that the number should increase in the next quarter. Ms. Jones said Komen Ozark started out with 50 slots, based on the dollars, and LHUs were originally involved and they did not bill for breast care so they were using slots where the money was not being spent, so then ADH opened it up to the community health centers and restricted it to them. With flu cases climbing and the winter weather, activity was slow for this time period.

Ms. Parrett asked if there was an increase in cases being handled by private provider hospitals. Ms. Jones said the higher numbers reflected duplicated services. Brandi Sutphin said women being served by mobile mammography facilities are also served by hospitals. Ms. Jones referred to reports on demographics and the county enrollment rates. Ms. Sutphin produced a map showing enrollment by counties and the darker an area is shown, the greater the enrollment. Dr. Henry-Tillman suggested that another map be made based on counties without facilities and low enrollment to see if they could be targeted better.

Lisa Bondurant asked why numbers in Central Arkansas appeared to be so low, compared with other counties. It was explained that counties in that region have such a large number of eligible women and the area is more densely populated, so the percentage of those enrolled would be lower.

Joanne Jones reported that federal grantors have added MRIs (magnetic resonance imaging) as a reimbursable procedure. Joanne will provide the criteria document with the minutes.

MRIs cannot be used as a screening tool alone and cannot be used for women diagnosed with breast cancer. They can be used to evaluate areas of concern on mammograms or for women who have completed breast cancer treatment. Dr. Henry-Tillman asked if these procedures were part of the private option of the Affordable Care Act. Ms. Jones said it was part of the BreastCare Program's federal grant for screening and diagnosis.

Dr. Fant said the Board has discussed MRIs numerous times at great length over the years. She said the MRI test costs as much as \$3,000, depending on the charges for imaging and diagnostic interpretation. The board discussed a few years ago that the program did not have enough money to cover MRIs for every individual who qualified for the evaluation and that the board could not determine an ethical way to decide which patient should get the test and which patient would not get it. The board decided it was not the board's role to make medical decisions for patients, and so the board decided to deny it across the board.

Ms. Jones said the federal criteria have been released for MRI coverage, but the policy is not yet written. Ms. Jones said she will send board members the revised federally approved reimbursable procedures. She also said a BreastCare staffer is pulling out the reimbursement rate and making them retroactive to January 1. Dr. Henry-Tillman asked when BreastCare Program staff will get this information to providers. Ms. Jones said the contractors' reports will cover all the ways which the staff is using to disseminate information about the program, including the new federal guidelines on MRIs.

Ms. Faitak asked if the Board was required to vote on the new federal codes. Dr. Henry-Tillman said that was not necessary because the new rules came from the federal government.

III. Other Board Business

A. Contractor Reports

Kay Creighton-Hays led a review of BreastCare contractors' reports. Breast Care staff is working on appropriate information to be disseminated through an e-blast (an e-mail message sent to a large number of e-mail addresses) and a providers' newsletter.

The Communications Group Report: Ms. Creighton-Hays said the BreastCare FaceBook web pages saw growth to more than 300 ‘likes’ in December 2013. Lisa Bondurant, representing The Communications Group (TCG), discussed high points of TCG’s contractor report. Following the special Breast Cancer Control Advisory Board meeting in December, TCG designed outreach to women concerning the “private option” form of health insurance available to families making up to 138 percent of the Federal Poverty Level.

Ms. Bondurant said a user-friendly e-Blast, designed by Holly Frein of TCG, showed an increasing “open rate” of 35 percent for an e-Blast distributed to more than 680 email addresses. A good communications industry open rate, counted when recipients open their e-mail messages, is 30 percent.

Ms. Bondurant said TCG targeted the 19 “Red Counties,” but significant increases in eligible women enrolling in the BreastCare Program do not show up in the Red Counties on the map in the meeting packet showing the percent of eligible women enrolled by county. She said they will consider adjusting the message and the target counties during an upcoming four-week \$30,000 radio schedule so that they reach more women in Red Counties.

Dr. Henry-Tillman asked if work had been done on getting out a message to people concerning the health-care reform act, especially the 20 percent of the people who fall outside coverage by the private option.

Communications Strategy: Ms. Creighton-Hays said there has been a tremendous amount of communication put out on that topic. A BreastCare Provider Communication Strategy was presented and amended at the special advisory board meeting in December. Sixteen strategies were proposed, and 11 were completed and five are in the process of being completed. Among strategies proposed were an e-mail and hard-copy letters to providers, web-site postings, news releases, personal e-mail messages and FaceBook messages. The BreastCare Program is using several different ways to get out its message.

The HP Report: Royce Pinkard with HP presented the report on BreastCare Program billing, which included a graph on monthly reimbursement to BreastCare Providers, a chart on the number of claims processed, and the payments from state and federal funds, as well as the total payments for each week in the fiscal year. HP also produced charts showing by quarter BreastCare Billing Assistance – Incoming Telephone Call Volume, the number of BreastCare Claims Processed and the number of Provider Training and Outreach events. Call volume was down a bit for the past quarter, and Mr. Pinkard attributed that to providers becoming more informed about the processes. HP’s provider representative will go to a provider’s office, if needed, for training. HP also provides training opportunities through its web site.

The Witness Report: Laprisha Bennett represented The Witness Project for the meeting. The Project report showed in the second quarter that two education programs were held which were attended by 31 African-American women, and two mobile screening events were held and attended by 25 women.

Resource Directory: Ms. Creighton-Hays discussed the Resource Directory which is available on the BreastCare Program web pages. The program staff started with 21 pages and has added 16 more pages. TCG has helped with layout and design. It is easy to navigate, and information will be broken down by region, state and nationally. She said she hopes that the pages will be approved and put on line within the next few weeks. A new feature being added is contact information for support groups. Ms. Creighton-Hays complimented the board on suggesting establishment of the resource directory, and the BreastCare staff is continuing to add to it.

Speakers Bureau: Ms. Creighton-Hays discussed work on a speakers bureau of individuals who would go out into the community and address BreastCare topics. A list has been compiled of eight speakers, who will talk without charge to social, business or church events. All but one of those speakers has received BreastCare services, Ms. Creighton-Hays said. Among the speakers on the list are community members, Karen Young with HP, and board members; Dr. Fant, Dr. Henry-Tillman, Ms. Faitak, Ms. Parrett. Dr. Henry-Tillman suggested that UAMS fellows, who are required to do public service, should also be approached to join the Speakers Bureau. Dr. Henry-Tillman suggested a couple of doctors as well. Kay will follow-up to get their contact information. Requests for speakers are expected to increase during October which is BreastCare Month and when the Arkansas Race for the Cure is held. Ms. Creighton-Hays said the staff will put together a complete list and send out the link to board members. Dr. Henry-Tillman suggested that individual speakers provide the October dates when they can speak. Ms. Creighton-Hays said groups are open to a variety of topics on BreastCare.

BreastCare Grants: Ms. Creighton-Hays gave an update on BreastCare grants, The Komen grant applications, for the State of Arkansas, Ozark and Texarkana, have been filed. The Centers for Disease Control and Prevention (CDC) grant is in final review.

Summary of BreastCare Activity: Ms. Jones summarized BreastCare Program activity and said she would keep board members posted on activities: ADH staff is trying to roll out the WISEWOMAN (Well-Integrated Screening and Evaluation for Women Across the Nation) program beginning in March. She thanked the board members for soliciting potential providers for that program, and Alysia Cover said more providers are needed. The provider manual has been completed. Cheryl Roland is working on information technology (IT) improvements and an evaluation plan. And in addition to these projects, the second year BreastCare grant application is coming due.

CME Presentations & Josetta Wilkins Awards: ADH, with the University of Arkansas for Medical Sciences (UAMS), provided cardio-vascular continuing medical education (CME) credits during three one-hour presentations over the past three weeks. On three Tuesdays, March 4, 11 and 18, similar CME presentations on breast care issues will be given. The topics have yet to be determined, and Ms. Jones welcomed suggestions for the topics.

Ms. Creighton-Hays said on March 18, after the third breast care CME presentation, the Josetta Wilkins awards are scheduled to start at 1 p.m. to honor individuals and organizations contributing to breast care during the past year. She said the staff has worked with TCG to produce a streamlined and condensed plan for the awards.

Ms. Parrett noted that the Josetta Wilkins Awards are on the same day as the Arkansas Cancer Coalition meeting. The awards will be held in the UAMS Auditorium in Little Rock. The coalition meeting will be held at the Wyndham Hotel in North Little Rock from 7 a.m. to 4 p.m. Heather Bailey of TCG said Donna Terrell, a newscaster on Fox16, talked up the Josetta Wilkins awards and pleaded for nominations. Seventeen nominations were submitted after discussion of them was aired on Channel 16. The channel also plans to run an additional 50 spots encouraging viewers to nominate “a breast-care warrior” for the awards. The nomination forms are on the ADH BreastCare web site and the Fox16 web site.

Patient Protection & Affordable Care Act: Ms. Parrett asked what was being done to help people whose family income fell between 139-200 percent of Federal Poverty Level (FPL) and who no longer could depend on Medicaid to pay for breast care treatment. Joanne Jones said in addition to the communication plan, the regional care coordinators and Medicaid case manager have worked closely with the Arkansas Department of Human Services (DHS) section which used to handle the Medicaid 07 Program to determine if the approximately 700 women who had been in that program are receiving insurance coverage. Ms. Cover also said ADH staffers are talking to Medicaid officials about what can be done to help people who fall into the category of 139-200 percent of the FPL.

B. Travel Reimbursement for Board Members: Reginald Rogers, an attorney for ADH, reminded the board that for members to receive mileage reimbursement the board each calendar year must approve the payment of such reimbursement. Dr. Henry-Tillman made a motion to approve mileage reimbursement for members and Dr. Hope Keiser seconded it. There was no discussion on the motion which was approved unanimously.

IV. Closing

Dr. Henry-Tillman adjourned the meeting at 6:13 p.m.