

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Michigan Department
of Community Health



Minimum Program Requirements

Element: **Breast and Cervical Cancer
Control Program (BCCCP)**
(Categorical Funding)

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Effective Date: October 1, 2008

Director's Signature:

ELEMENT DEFINITION:

Through the locally-delivered direct service components of the comprehensive BCCCP, women who have breast or cervical cancer will be identified at earlier stages of these diseases when treatment is less expensive and less devastating and the survival rate is more favorable.

The local health department (LHD) shall perform activities necessary to control breast and cervical cancer mortality including providing access for low-income women to annual screening and any necessary medical follow-up services.

A local BCCCP will enroll low-income women aged 40-64 who do not belong to a prepaid managed care health insurance plan or who are not enrolled in Medicare parts A and B. Low income is defined as a household income of 250 percent of poverty or less. Special target populations to be screened are women previously screened by the BCCCP and minority women, especially those who are Native American, African American, or Hispanic. Additional under-served populations may also be selected to be targeted by the LHD as deemed appropriate for a geographic area.

MINIMUM PROGRAM REQUIREMENTS:

1. Coordinate with MDCH an annual review of minimum program and reporting requirements. **References:** PL 101-354, Section 1501 (a)(6); CDC Administrative Guidance; CPBC provision.
2. Assure that an accurate and integrated system of fiscal management is maintained on-site for health departments providing clinical services; assure that a system of communication is maintained across all other sites of clinical service delivery. **References:** PL 101-354, Section 1504 (e); CDC Administrative Guidance.
3. Assure that there is community involvement with issues related to relationships with the medical community, resources for follow-up care, and recruitment of target populations. **References:** PL101-354, Sections 1501 (a)(3) and 1504 (a); CDC Administrative Guidance.

4. Recruit women eligible for the BCCCP, giving priority to minorities and women aged 50 to 64 and women who have previously been screened through the BCCCP. **References:** PL 101-354, Sections 1501 (a)(3) and 1504 (a); CDC Administrative Guidance.
5. Assure that screening and follow-up services meet minimum state/federal requirements as specified for: a.) Mammography facilities, b.) Michigan licensed: Physicians, Certified Nurse Practitioners, Certified Nurse Midwives, or Physician Assistants, c.) Adherence to the BCCCP Medical Protocol. **References:** PL 101-354, Sections 1501 (a)(5) and 1503 (c)(d)(e); Amended Section 402 (c); State Advisory Committee Policies (WCDC, MCC).
6. Obtain each woman's informed consent at the beginning of each annual screening cycle. **Reference:** State Advisory Committee Policy (WCDC).
7. There is a system in place to monitor and to take corrective action as appropriate to assure that each enrolled woman is provided screening, diagnostic, and treatment services as needed, regardless of her ability to pay. **References:** PL 101-354, Sections 1501 (a)(1)(2) and 1503 (a)(1)(2)(a)(b); CDC Administrative Guidance; CDC Performance Indicators.
8. Assure compliance with the "funds of last resort" requirement in the federal law. **Reference:** PL 101-354, Section 1504 (d)(1)(2).
9. There is a system in place to monitor and take corrective action as appropriate, to assure that the reimbursement amount for each BCCCP-approved service is accepted as payment in full. **References:** PL 101-354, amended Section 402 (a)(1)(3); CDC Administrative Guidance.
10. Maintain, and utilize a computerized system (i.e., Michigan Breast and Cervical Cancer Control Information System- {MBCIS}) for tracking and monitoring clients. **References:** PL 101-354, Section 1501 (a)(6); CDC Administrative Guidance; CDC Performance Indicators.