

Statewide Medicaid Managed Care Program  
Healthy Behaviors Program Description

**Part I. Program Overview**

Plan Name	Preferred Medical Plan, Inc. (PMP)
Program Name	Cervical Cancer Screening
Brief Description of Program	<p>Worldwide, cervical cancer is the second most common type of cancer in women. It is much less common in the United States because of the routine use of Pap smears. The development of cervical cancer is very slow. It starts as a pre-cancerous condition called dysplasia. This pre-cancerous condition can be detected by a Pap smear and is 100% treatable. That is why, it is so important for women to get regular Pap smears. Most women that are diagnosed with cervical cancer today have not had regular Pap smears or they have not followed up on abnormal results. Undetected, pre-cancerous changes can develop into cervical cancer and spread to the bladder, intestines, lungs, and liver. It can take years for pre-cancerous changes to turn into cervical cancer. Patients with cervical cancer do not usually have problems until the cancer is advanced and has spread. PAP smears have been shown to be an effective screening tool for cervical cancer. The goal of this program is to incentivize women 21-64 years of age who receive one or more Pap tests during the measurement year or the two years prior to the measurement year.</p> <p>The program will be made available to all eligible members and will be added to member materials including member handbooks. Members retain the right to select PCPs and will have access to any applicable network providers for any healthy behavioral program.</p>
Description of Enrollee Identification Method	Initial Welcome Call, Health Risk Assessment Screening Tool, Data Providers, Medical Record Review, Claims, Laboratory Data, HEDIS Metrics
Description of Written Agreement/Program Enrollment Process (if applicable)	N/A

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**Part II. Interventions and Incentives**

Intervention	Incentive Type*	Incentive Value *	Incentive Criteria	Limitations
Cervical Cancer Screening: All eligible females 21 to 64 as of December 31 <sup>st</sup> of the measurement year using the following criteria: <ul style="list-style-type: none"> <li>• Age 21-64 who had a cervical cytology performed every 3 years</li> <li>• Age 30-64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years.</li> </ul>	Grocery gift card, a For Your Entertainment (FYE) music gift card, an iTunes gift card or two AMC movie tickets.	\$10.00	Incentive paid after plan confirms member has completed their annual Cervical Cancer Screening. If HEDIS schedule changes from once a year to once every third year, member will be incentivize one time during the three year period.	<ul style="list-style-type: none"> <li>• Had a hysterectomy with no residual cervix.</li> <li>• Member who leave the program voluntary.</li> <li>• Not meeting the HEDIS specifications.</li> </ul>

**Part III. Milestones, Goals and Rewards**

Milestone/Goal	Reward Type*	Reward Value*	Reward Criteria	Limitations
Incentive paid after plan confirms member has completed their annual	Grocery gift card, a For Your Entertainment (FYE) music gift card,	\$10.00	After plan confirms member has completed their annual Cervical Cancer Screening. . If HEDIS	<ul style="list-style-type: none"> <li>• Had a hysterectomy with no residual cervix.</li> <li>• Member who leave the program</li> </ul>

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Pap Smear Screening.	an iTunes gift card or two AMC movie tickets.		schedule changes from once a year to once every third year, member will be incentivize one time during the three year period.	voluntary. <ul style="list-style-type: none"> <li>• Not meeting the HEDIS specifications.</li> </ul>
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**Part IV. Evidence Base**

<p>Detailed Description of Research to Support Effectiveness</p>	<p>When it comes to screening for cancer, a common belief held by doctors as well as patients is "more is better." It seems only logical that more frequent screening with the newest technologies translates to more cancers detected at the earliest possible time and, ultimately, more lives saved.</p> <p>Cervical cancer is an example of why this is not necessarily so. Dating back to the late 1940s, the Pap test has been detecting not only early cervical cancers, but changes in the cervix ("pre-cancers") that when treated or removed lead to actual prevention of cancer in addition to early detection. For decades, the majority of women in this country have scheduled their doctor appointments around their "annual Pap." As a result of widespread Pap testing, mortality rates dropped by 70% and the Pap test became the biggest success story for cancer screening in history.</p> <p>In the late 1980s, it was discovered that cervical cancer is caused by HPV, the human papilloma virus. Studies of the natural history of HPV and cervical cancer showed that it takes, on average, 10-20 years from the time a woman is first infected with HPV until the time a cervical cancer might appear.</p> <p>In 1987, the American Cancer Society, and several other national organizations, recommended that most women could safely be screened for cervical cancer with the Pap test every 3 years rather than every year. Twenty-five years later, studies show that the majority of health care providers still recommend annual screenings and that the majority of women expect annual screenings.</p> <p>Ten years ago, the American Cancer Society and others recommended that a new screening test, one that detects the HPV virus, could be used along with the Pap test to screen women aged 30 years and older for cervical cancer.</p> <p><b>New cervical cancer screening guidelines</b></p> <p>Now the American Cancer Society, working with 25 other organizations, recommends that women ages 30-65</p>
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	<p>should be screened with both the HPV test and the Pap test, called "co-testing," as the <i>preferred</i> strategy. (Screening with the Pap test alone every 3 years is still acceptable.)</p> <p>The risk of getting cancer for a woman who is screened every 3 years with the Pap test is extremely low, and similar to the risk of cancer when screened every 5 years with both the HPV test and the Pap test. In fact, in the United States, most women who get cervical cancer have not been screened in at least 5 years. About half of them have never been screened in their lifetime.</p>
References	<ul style="list-style-type: none"> <li>American Cancer Society</li> <li><a href="#">Cervical Cancer</a>. <i>Cervical Cancer: Cancers of the Female Reproductive System: Merck Manual Home Edition</i>. Merck Manual Home Edition. Retrieved on <a href="#">2007-03-24</a>.</li> <li>NCCN Clinical Practical Guidelines in Oncology: <b>Cervical cancer</b>. 1st ed. 2008. Accessed June 10, 2008.</li> <li><a href="http://www.floridahealthfinder.gov">www.floridahealthfinder.gov</a></li> </ul>

### Part V. Definitions

Intervention	Any measure or action that is intended to improve/restore health or alter the course of disease (e.g. – counseling sessions, educational classes, etc.)
Incentive	Something offered to the enrollee that encourages or motivates him/her to take action (i.e. intervention)
Reward	Something offered to the enrollee after successful completion of a milestone or attainment of a goal
Milestone/Goal	Meaningful step toward meet a goal or actual goal to be attained.
Type	The nature of the incentive/reward
Value	The monetary value of the incentive/reward
Criteria	Condition(s) that must be met for the enrollee to receive the incentive/reward
Limitation(s)	Any restriction(s) that result in an enrollee not qualifying to receive the incentive/reward



SMMC APPROVED

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**\*IMPORTANT NOTE:** Please attach additional documentation to support Type and Value on the following page(s)