WEST VIRGINIA CODE CHAPTER 16 ARTICLE 33

WV Legislature

§16-33-1. Short title.

This article may be cited as the "Breast and Cervical Cancer Prevention and Control Act".

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§16-33-2. Definitions.

[Repealed.]

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§16-33-3. Establishment of breast and cervical cancer detection and education program.

(a) There is hereby created within the department the breast and cervical cancer detection and education program. This program is established to promote screening and detection of breast and cervical cancer among unserved or underserved populations, to educate the public regarding breast and cervical cancer and the benefits of early detection, and to provide counseling and referral services.

(b) The program shall include:

(1) Establishment of a public education and outreach campaign to publicize breast and cervical cancer detection and education services, including the extent of coverage for such services by health insurance, the medical assistance program and other public and private programs;

(2) Provision of grants to approved organizations under section four of this article;

(3) Compilation of data concerning the breast and cervical cancer detection and education program and dissemination of the data to the public; and

(4) Development of professional education programs including the benefits of early detection of breast and cervical cancer and the recommended frequency of screening examinations for prevention and control.

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§16-33-4. Grants to approved organizations.

(a) The director shall make grants, within the amounts appropriated, to approved organizations for the provision of services relating to the screening and detection of breast and cervical cancer as part of this program. Such services shall include, but not be limited to:

(1) Promotion and provision of early detection of breast and cervical cancer, clinical examinations, including pap testing and mammography and breast self-examination;

(2) Provision of counseling and information on treatment alternatives and referral for appropriate medical treatment;

(3) Dissemination of information to unserved and underserved populations, to the general public and to health care professionals concerning breast and cervical cancer, the benefits of early detection and treatment and the availability of breast and cervical cancer screening services;

(4) Identification of local breast and cervical cancer screening services within the approved organization's region; and

(5) Provision of information, counseling and referral services to individuals diagnosed with breast or cervical cancer.

(b) (1) The director shall give notice and provide opportunity for organizations to submit applications to provide breast and cervical cancer detection and education programs. In order to be considered for a grant to provide breast and cervical cancer detection and education programs, applicants must show evidence of the following:

(A) Ability to provide and to ensure consistent and quality breast and cervical cancer detection services;

(B) Expertise in breast and cervical cancer detection and treatment;

(C) Capacity to collaborate and coordinate services with physicians, hospitals and other appropriate local institutions or agencies;

(D) Ability to provide breast and cervical cancer detection and education services to unserved or underserved populations; and

(E) Ability to implement a breast and cervical cancer detection and education program in accordance with national organization standards of high quality, as described in subsection (c) of this section.

(2) Applications shall be made on forms provided by the director for approval of grants to provide breast and cervical cancer detection and education programs by organizations,

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including, but not limited to:

(A) Local boards of health organized under articles two and two-a of this chapter;

(B) Licensed health care facilities, including the public and private sector;

(C) Any combination of the above; and

(D) Organizations with program expertise in cancer related issues.

(c) In evaluating applications the director shall consult the most recent medical practice and procedures in breast and cervical cancer detection and education standards for breast and cervical cancer detection and education programs of organizations with national recognition for expertise in breast and cervical cancer detection and treatment with the objective to ensure the following:

(1) Integration linkage and consultation with approved organizations, health care facilities and providers;

(2) Maximization of third-party reimbursement; and

(3) Provision of services to unserved or underserved populations.

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§16-33-5. Breast and cervical cancer detection and education program coalition.

[Repealed.]

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§16-33-6. Annual report.

The director shall submit an annual report to the Governor and the Legislature concerning the operation of the breast and cervical cancer detection and education program including available data and assessment. Such report shall also include any recommendations for additional action to respond to the high incidence of breast and cervical cancer in this state. The report shall be transmitted to Governor and members of the Legislature electronically. Further, the report shall be provided to the legislative librarian to be posted to the legislative website. No hard copy of the report shall be issued; however, upon request a hard copy shall be provided.

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§16-33-7. Establishment of breast and cervical cancer diagnostic and treatment fund.

(a) There is hereby established the breast and cervical cancer diagnostic and treatment fund which shall provide financial assistance for the medical care of indigent patients for diagnostic and treatment services for breast and cervical cancer.

(b) The fund may be comprised of moneys appropriated to the fund by the Legislature, allocated to the fund by the federal government and all other sums designated for deposit in the fund from any source, public or private.

(c) The fund shall be administered by the office of maternal and child health within the bureau of public health. The bureau shall file an annual report with the Joint Committee on Government and Finance describing the operation and status of the fund, acts, policies, practices or procedures of the bureau in implementing the provisions of this article, and the bureau's recommendations as to changes in law or policy which it deems necessary or appropriate.

(d) Nothing in this article may be construed or interpreted to mean that covered diagnostic and treatment services are required to be provided by the bureau or the department. Nothing in this article shall be construed to mandate funding for the breast and cervical diagnostic and treatment fund or to require any appropriation by the Legislature to the fund.

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§16-33-8. Responsibilities of advisory committee; establishment of covered services, limitation of services and procedures; authorization for payment; promulgation of rules; annual reports.

(a) The advisory committee shall establish procedures and requirements regarding participation in the fund, including, but not limited to, the following:

(1) Establishing a list of covered services approved for payment through the fund, including (A) diagnostic and treatment services for breast or cervical cancer or a condition suggestive of cancer, and (B) ancillary diagnostic studies which may be authorized only when it is determined by the bureau to be directly related to the confirmation of a diagnosis of cancer or is necessary for treatment planning;

(2) Establishing procedures for emergency admissions or immediate patient entry into the health care system upon a determination that covered services are necessary so as to ensure prompt testing, diagnosis or treatment of breast or cervical cancer.

(3) Setting a limitation on days of service covered by the fund, and authorizing that the number of days for reimbursement be based on the medical condition of the patient and the procedure to be performed;

(4) Reviewing requests and providing authorization for payment of diagnostic or treatment services covered by the fund;

(5) Promulgating rules, in conjunction with the bureau, in accordance with the provisions of chapter twenty-nine-a of this code regarding the administration of the fund; and

(6) Submitting annual reports to the state bureau of public health regarding the operation and progress of the fund, the number of patients treated through the fund, and other statistical data as may be required by the bureau.

(b) The advisory committee shall study the possibility of and the cost associated with establishing a fund to provided financial assistance to qualified applicants for diagnostic and treatment services for prostate and colon cancer. The committee shall provide a report to the Joint Committee on Government and Finance on or before January 1, 1997.

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§16-33-9. Financial eligibility.

To be eligible for services under the fund, a patient's income must be at or below two hundred percent of the federal poverty level in accordance with the prevailing national poverty income guidelines and be medically eligible for participation pursuant to the provisions of section ten of this article. No patient who is covered by medical insurance, Medicaid or Medicare may be financially eligible for participation in the fund.

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§16-33-10. Medical eligibility.

(a) In addition to the requirements contained in section nine of this article, in order to be eligible for services under the fund, a patient shall have a condition strongly suspicious of cancer which requires diagnostic services to confirm the preliminary diagnosis to be medically eligible for diagnostic authorization. The bureau may authorize only those services determined by the advisory committee to be medically necessary to confirm a preliminary diagnosis.

(b) A positive pathology report is required before treatment services may be authorized by the fund.

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§16-33-11. Application forms and process.

(a) The bureau shall develop authorization request forms and make the forms available to the provider upon request.

(b) An application for inpatient diagnostic services shall be accompanied by a written, signed statement from the attending physician which includes the medical basis for requested inpatient services and explains why the services may not be performed on an outpatient basis.

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§16-33-12. Reimbursement process.

(a) The fund is the payor of last resort. Payment for procedures shall be made at the prevailing rate established by Medicare.

(b) A claim for authorized services rendered shall be processed in accordance with rules promulgated by the bureau.

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