

Oklahoma Breast & Cervical Cancer Annual Addendum State Fiscal Year 2022



PURPOSE

The Oklahoma Breast and Cervical Cancer Act (OBCCA) was established in 1994 to implement plans to significantly decrease breast and cervical cancer morbidity and mortality in the state of Oklahoma (63 O.S. §1-554). An amendment to the OBCCA in 2013 shifted the responsibility of annual report from the Breast and Cervical Cancer Prevention and Treatment (BCCPT) Advisory Committee to the Oklahoma State Department of Health (OSDH). In April 2021, Governor Stitt, signed SB136 changing the requirement from an annual report to a required report every 5-years and with addition of an annual addendum. The addendum will report on updates to the three Breast and Cervical Cancer Early Detection Programs in Oklahoma, (Take Charge!, Cherokee Nation, and Kaw Nation) including budgets, the number of Oklahomans served, along with a personal story of an individual benefiting from the services offered by one or more of the programs. The format for the five-year report will remain the same.

Oklahoma has three screening programs serving low-income, uninsured, and underinsured women

BREAST AND CERVICAL CANCER EARLY DETECTION PROGRAMS (BCCEDP)



Oklahoma's BCCEDP receive funding through a cooperative agreement with the Centers for Disease Control and Prevention (CDC) and work in partnership ensuring Oklahomans receive enrollment in the screening program that best fits their needs. The three programs work closely with each other and community organizations helping all Oklahomans acquire breast and cervical cancer screening. The programs also work together offering referrals for breast and cervical cancer diagnostic services and treatment.

PURPOSE



Facilitate
early
screening



Ensure
prompt
diagnosis



Improve
access to
treatment

PROVIDES ACCESS TO SCREENING SERVICES

- Clinical breast exam
- Mammogram
- Pelvic exam
- Pap test
- HPV co-testing


-----BCCEDP PROGRAM-----


Cherokee Nation
Began 1996


Kaw Nation
Began 2001

Take Charge! Program
Began 1995

-----Services Provided in SFY 2022-----

 **27,982**
eligible women
screened since
inception

 **5,529**
eligible women
screened since
inception

 **74,912**
eligible women
screened since
inception

1,821
breast
cancer
screenings





273
breast
cancer
screenings




899
breast
cancer
screenings



 **1,216**
cervical
cancer
screenings

 **267**
cervical
cancer
screenings

 **586**
cervical
cancer
screenings

-----FUNDING SFY 2021-----

 Federal:
\$745,000

 Tribal:
\$248,333

 Federal:
\$413,521

 Tribal:
\$137,840

 Federal:
\$800,000

State:
\$266,667

 Revolving:
\$31,862

 Total:
\$993,333

 Total:
\$551,361

 Total:
\$1,098,529

Note: Federal BCCEDP funds require a \$3:\$1 match in the amount of \$248,333.

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Helping Oklahomans

Kaw Nation- In early March 2021, we had a 45-year-old patient arrive for a Kaw Women's Health Program well woman's exam. She had not had a mammogram since 2019 due to COVID-19; she simply did not want to go through the trouble of traveling somewhere to get it done. The patient had no history of breast cancer in her family and did not think she needed annual screening. The Kaw Women's Health Program Team discussed the importance of annual screening mammograms at length with the patient, and finally she agreed to get a mammogram done.

In the middle of March, the patient had her screening mammogram. It came back as suspicious, and she had a diagnostic mammogram, ultrasound, and biopsy done. To her disbelief, the biopsy came back that she had Invasive Breast Cancer. The Kaw Women's Health Program Team immediately referred her to an oncologist and a surgeon for cancer treatment. She was uninsured, so The Kaw Women's Health Program Team helped her apply for the Oklahoma Cares Program, which is the Breast and Cervical Cancer Treatment Program for Oklahoma. She was APPROVED for the program, with the program backdating to her diagnosis date, thereby allowing for payment of all of her cancer treatment.

Fast forward to today, she has had treatment, consisting of a lumpectomy and radiation. She is cancer free but her oncology team is monitoring her closely for any changes. If not for her mammogram in March 2021, her breast cancer would still be spreading unchecked and undiagnosed. Faster treatment leads to better outcomes. She did not have a family history of cancer, leading her to think she did not need annual screening mammograms. Today she is so glad she had one done and now knows the importance of annual breast cancer screening.

Take Charge! Program- Recently, Take Charge! provided breast and cervical cancer services for a patient over the age of 50 who had not had a cancer screening since 2014. She received a clinical breast exam, a pap, a pelvic exam, human papilloma virus (HPV) testing, and a referral for screening mammogram. All the tests she received came back as normal except for her screening mammogram. Her mammogram report was a Breast Imaging-Reporting and Data System (BIRADS) 0. A BIRADS 0 is an incomplete assessment, meaning the imaging facility recommends additional breast imaging or comparison of previous mammograms. In this patient's case, the recommendation was for a diagnostic mammogram and ultrasound. Take Charge! was able to pay for the additional testing; the results of the additional tests were categorized as BIRADS 4, meaning suspicious for cancer. A BIRADS 4 finding meant that the patient would need biopsy to determine if the diagnosis was indeed cancer. The biopsy results came back negative for cancer; a wonderful relief for the patient. She will continue with a follow-up mammogram in 6 months, just to be safe. Take Charge! will continue to cover the cost of her follow-up exams and provide patient navigation services as long as she continues to qualify for the Take Charge! Program. Take Charge! is pleased to be able to cover vital cancer screenings for both this patient as well as all other Oklahomans who qualify with no out-of-pocket expense. The patient was happy to have received her cancer screenings, the needed diagnostic testing, along with her results so quickly. Take Charge! Program offered the patient a priceless resource...peace of mind.

ADVANCEMENT OF WELLNESS ADVISORY COUNCIL

RECOMMENDATIONS

1. Increase number of never and rarely screened program-eligible women and improve adherence to guidelines for breast and cervical cancer care to decrease cancer incidence, morbidity, and mortality.
2. Partner within communities of color (AA/B, and NA/AN) as well as lesbian, gay, bisexual, transgender, queer/questioning, Two-Spirit, and pansexual (LGBTQ+) communities to reduce cancer disparities.