

# KWCSP: Data Processing Update

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**Kentucky Public Health**  
Prevent. Promote. Protect.



**TEAM**   
**KENTUCKY**<sup>®</sup>  
CABINET FOR HEALTH  
AND FAMILY SERVICES

# Kentucky Department for Public Health

## Mission and Vision in Action

**Healthier People,  
Healthier Communities.**

Our mission is to improve the health and safety of people in Kentucky through prevention, promotion and protection.

### Prevention

- Diabetes Prevention
- Disease Surveillance
- Environmental Inspections
- HANDS

### Promotion

- Immunizations
- KEIS
- Mobile Harm Reduction
- Newborn Screening

### Protection

- Prescription Assistance
- Public Health and Disaster Preparedness
- Smoking Cessation
- WIC


# Funding and Eligibility

 **Source of KWCSP Funds:** CDC funds : \$2.8 million

 **Eligibility for KWCSP:**

- Age: 21 years and above
- No Medicare, Medicaid, private health insurance or any third party payors
- At or below 250% annual federal poverty guidelines

# Audit Reports


 Please continue to work on Audit Reports. We are working on it to make it timely and complete. We are combining all Audit Reports into one report. We expect revisions to be completed by July 10th. These Audit reports would run on 5<sup>th</sup> or the next business day.

# KWCSP Updates

 Revised WH-58 Form is effective January 1, 2023.

The form can be downloaded from the website


<https://www.chfs.ky.gov/agencies/dph/dwh/Documents/wh58.pdf>

 We have a new KWCSP approved CPT code Version 13.0. The new rate list will be effective January 1, 2023. Based on the new rate list, LHDs are going to get more reimbursements from the program.

# KWCSP Reimbursements

1. All LHDs will see an increased reimbursements in their July payments from the program for FY 2023.
2. If a patient had services in FY 2023. Please get your bills from providers as soon as possible so that we can reimburse you from the 2023 grant amount.
3. LHDs on **ezEMRx** System: Please check your total reimbursements amount. If you have paid more to your providers for KWCSP for clinical services but those payments don't match with our payments to you. Please reach out to me ASAP.

MDE Record 1. Yes ▾

Clinic 7507507 ~~CLINIC NAME~~ PORTLAND ▾Record Date 06/26/2023 


Provider 20191 PHYSICIAN

## Breast Section

Breast Services Provided 1. Yes ▾ If No, proceed to cervical section

## Section A: Breast Screening Data

CBE 1. Normal ▾

CBE Date 06/26/2023 **MAM Test** 1. Yes, mammogram ordered as part of routine screening ▾If 3 MAM performed elsewhere, date referred to diagnostics MM/DD/YYYY 

Screening MRI 2. No ▾

Is client at HIGH risk for breast cancer 2. No ▾

## Section B: Mammogram/MRI Results Data

Mammogram Results(BI-RADS)  ▾MAM Date MM/DD/YYYY 

MRI Results(BI-RADS) ▾

MRI Date MM/DD/YYYY 

Diagnostic procedure (work-up)Planned? 2. No ▾

Nurse Case Manager ▾

## Cervical section

Prior PAP Test 1. Yes ▾

Prior PAP Test Date 01/01/1950 

Cervical Services Provided 1. Yes ▾ If No, proceed to breast section

## Section A: Cervical Screening Data

PAP Test 1. Yes, Pap performed as part of routine screening ▾

If 3 PAP performed elsewhere, date referred to diagnostics MM/DD/YYYY 

HPV Test 1. Co-Testing or Primary HPV+ ▾

Is client at HIGH risk for cervical cancer ▾

## Section B: PAP/HPV Test Results Data

PAP Test Result 1. Negative for Intraepithelial Lesion or Malignance ▾

PAP Test Date 06/26/2023 

HPV Test Result 4. Negative ▾

HPV Test Date 06/26/2023 


Diagnostic procedure (work-up)Planned? 2. No ▾

Date Case Closed MM/DD/YYYY 

# Question and Answers

 **1. Q:** Do we complete WH-58 form for Family Planning Program patients?

**A:** “Yes only if a FP patient has Pap and/HPV test/ follow-up diagnostic services. If a patient had just CBE and it is normal, then you don’t have to complete the form.

 **2. Q:** Do we complete WH-58 form if a patient only had a pelvic exam but no other services including CBE, Pap, HPV or a mammogram?

**A:** No, do not fill out WH-58 forms/cancer screen on such patients. CDC does not consider pelvic exam as a cervical cancer screening service.



# Question and Answers

 **3. Q:** Can patients be screened who don't reside in Kentucky? Has this changed?

**A:** KWCSP will reimburse for services for any patient as long as they qualify, irrespective of their primary residence.

 **4. Q:** When entering the 'Prior PAP test date' on the WH-58/Cancer Screen, it does not take the full date.

**A:** Please use 01 for unknown month and day. Ex: 01/01/2022.

# Question and Answers

 **5. Q:** What do we do when several providers appear under the site #/county dropdown on the WH-58 Cancer Screen (no longer relevant)?

**A:** If providers have retired or no longer participating, please contact Local Health Operations @ [localhealth.helpdesk@ky.gov](mailto:localhealth.helpdesk@ky.gov) 502-564- 6663, Option 1. They will delete them from the list.

# Question and Answers

 **6. Q:** When do we use the option of Lost to Follow-up?

**A:** “Lost to Follow-up” option should be used for women when tracking efforts have been attempted, but have failed regardless of whether the reason is known (i.e. death, moved).

 **7. Q:** What date do we use to report Lost to Follow-up?

**A:** You can use the date of last contact with the patient or certified letter date.

# Question and Answers

 **8. Q:** When do we use the option of Work-up Refused?

**A:** “Work-up Refused” option should be used when a patient does not keep an appointment or refuses services.

 **9. Q:** What date do we use to report Work-up Refused?

**A:** You can use the date of last contact with the patient or certified letter date.

# Question and Answers

 **11. Q:** How do we report if a patient has an ultrasound, but no screening/diagnostic mammogram?

**A:**

Breast Services Provided	1. Yes	If No, proceed to cervical section
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<b>Section A: Breast Screening Data</b>			
CBE	1. Normal	CBE Date	02/23/2022
MAM Test	4. No, mammogram not performed		
If 3 MAM performed elsewhere, date referred to diagnostics	MM/DD/YYYY		
Screening MRI	2. No		
Is client at HIGH risk for breast cancer	3. Unknown		

<b>Section B: Mammogram/MRI Results Data</b>	
Mammogram Results(BI-RADS)	
MAM Date	MM/DD/YYYY
MRI Results(BI-RADS)	
MRI Date	MM/DD/YYYY
Diagnostic procedure (work-up)Planned?	1. Yes

<b>Section C: Breast Diagnostic/Follow-up Data</b>	
1. Status of Breast Diagnosis	1. Work-up complete
2. Date of Final Diagnosis	03/28/2022
3. Final Breast Diagnosis	3. Breast Cancer not diagnosed
4. Treatment Status	
5. Date of Treatment Status	MM/DD/YYYY