HCFA
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Health Care Financing Administration

February – March 1999

# Not Just Once

THE BIMONTHLY NEWSLETTER OF HCFA'S NATIONAL MEDICARE MAMMOGRAPHY CAMPAIGN

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THE BIMONTHLY NEWSLETTER OF HCFA'S NATIONAL MEDICARE MAMMOGRAPHY CAMPAIGN

Call us and we will add them to our mailing list.

Tel: 312-353-1753

## Welcome from Ta Budetti and Sandy Kappert

### *Happy New Year!*

Although we are already well into 1999, we want to take this opportunity to wish everyone a happy and healthy year. The year 1999 is a unique time in our lives. We are at the beginning of a the new year, and we are also at the end of a century! We look forward to working with you during this momentous year.

The early diagnosis and treatment of breast cancer is both a HCFA and a national priority. Primary prevention of breast cancer is not yet feasible, so prompt detection through regular screening is critical. Therefore, we are all committed to achieving the Healthy People 2000 goal - to increase the biennial mammography rate among Medicare beneficiaries over age 65 to at least 60 percent.

As we enter the home stretch of this Century, it is essential that we work together and maximize our resources. In this issue of the newsletter, we provide information about new activities, lessons learned, tools to help with your efforts and ongoing activities. We hope that this information is helpful to you. Please let us know what would be of interest to you and helpful druing this year. You can e-mail your ideas and suggestions. Articles are always welcome.

We welcome your feedback! Sincerely:

**Ta Budetti**
Deputy Regional Administrator
HCFA, Region V, Chicago

**Sandy Kappert**
Director, Division of Health Promotion
HCFA's Center for Beneficiary Services

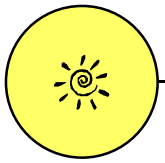
# Partnering to Improve Outcomes: The PHS Federal Coordinating Committee on Breast Cancer

The Federal Coordinating Committee on Breast Cancer (FCCBC) works to coordinate the exchange of information on breast cancer programs and activities across government agencies and to transfer interagency collaborations to fight the disease. Coordinated by the U.S. Public Health Service's Office on Women's Health (PHS OWH) in the Department of Health and Human Services (DHHS), the FCCBC convened a meeting of government leaders in women's health and breast cancer to address partnering issues. The conference, *Partnering To Improve Outcomes: Opportunities for Collaboration in government Breast Cancer Programs*, was held in Arlington, Virginia on September 28, 1998. "Partnering To Improve Outcomes" grew out of the results of a needs assessment of FCCBC representatives indicating the need for information about methods for partnering among Government agencies to strengthen programs in breast cancer research, prevention, outreach, and service delivery.

The Conference's four main objectives were: (1) to provide information about government partnerships in breast cancer programs, (2) to present opportunities to identify potential partners and enhance collaborative networks, (3) to provide opportunities to learn about barriers and facilitators to partnerships, and (4) to give feedback to the FCCBC about assisting agencies to develop effective partnerships. The one-day meeting featured plenary presentations, breakout sessions, and a final presentation integrating the results of the day's activities. Wanda K. Jones, Dr.P.H., Deputy Assistant Secretary for Health (Women's Health), began the day by welcoming participants to the meeting and charging them to work together to redouble efforts in the fight against breast cancer by building more efficient networks of collaboration among government agencies and between the government and the private sector.

Plenary speakers from eight government agencies involved in the fight against breast cancer provided highlights of successful agency partnerships and highlighted ways in which partnerships have uniquely contributed to achieving agency goals. During this session, Carol Cronin, Director of HCFA's Center for Beneficiary Services, described HCFA's Multi City Mammography Projects, which target African American and Hispanic American Medicare beneficiaries and works with local partners, health departments, and Areas on Aging to develop consistent messages. During the Services and Prevention breakout session, NCI and HCFA jointly presented on our collaborative Medicare Mammography Campaign, designed to increase the number of older women receiving mammograms.

We encourage you to contact the PHS Office on Women's Health, which can provide you with a copy of the white paper on the *Partnering to Improve Outcomes* conference, at **(202) 690-7650**. For more information on the Department's women's health efforts, please visit their informational website at: **www.4woman.org**

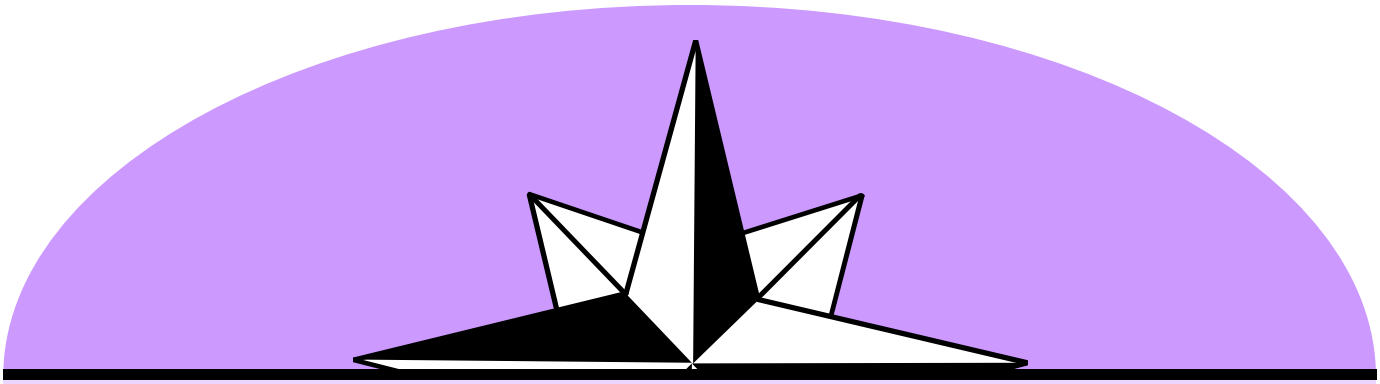


# NCI's Consumer Health Profiles

Last month, HCFA partners at the National Cancer Institute kindly disseminated Consumer Health Profiles "Cluster Profiles" binders to all PRO Communication Directors, as well as to HCFA's Regional Medicare Mammography Coordinators, as part of HCFA's Medicare mammography campaign. NCI's Consumer Health Profiling Project (CHP) is a unique social marketing tool that accesses geodemographic, health and lifestyle information and combines them in a form that helps program planners increase the effectiveness of public health interventions.

Many Regional Offices and PROs have already taken advantage of learning how to utilize this tool for identifying and locating target audiences, and tailoring more effective outreach strategies for these populations. We encourage you to contact your local Cancer Information Service (CIS) outreach manager if you have not already done so. Your CIS contact can provide you with narrative descriptions of the specific clusters in the area you serve, and can explain how to interpret and use these profiles.

Although we are providing this information as part of our Medicare mammography campaign, CHP can clearly be helpful to you on a variety of levels from outreach to program and beyond. We would be glad to assist you in contacting your local CIS outreach manager, who can help PROs and ROs put NCI's useful Consumer Health Profiling Project to work for you. Please contact Rachel Klugman in HCFA's Chicago Regional Office for more information at (312) 886-5352. We encourage you to take advantage of this unique database that is available free of charge as part of HCFA's Medicare mammography campaign.



# Improving Mammography Use: A Goal for the New PRO Contract

By Annette E. Kussmaul, MD, MPH
HCFA, Region VI, Kansas City

In the last six years, HCFA's Peer Review Organizations (PROs) have moved away from individual case review. The Health Care Quality Improvement Program (HCQIP) has refocused them to address systematic problems in medical care. Now the PRO role is that of "change agent," facilitating improvements in the health care provided to Medicare beneficiaries.

The HCQIP has evolved since its inception in 1993. Originally, PROs selected quality improvement topics based on local or individual interest. Some local "success stories" resulted. However, the variety of projects limited the ability to demonstrate HCQIP achievement nationally. Now, in the PROs' new contract, HCFA is directing them to work in six priority areas, including breast cancer.

All of the PROs will be expected to improve mammography rates among women Medicare beneficiaries during the next three years. Some PROs have experience in this area; educational campaigns, such as public service announcements, small group discussions with beneficiaries, and direct mail reminders have been popular activities. This priority in the new contract challenges PROs to expand their intervention strategies, to address mammography as quality improvement "change agents."

When asked why they have not had a mammogram, many women say that their doctor did not discuss it with them. Physician recommendation is particularly important in mammography use. PROs could foster improvement-- an increase in the mammography rate -- by collaborating with physicians' offices and outpatient clinics to promote systematic, regular mammogram referral. This is just one example of the new interventions and partnerships which can improve mammography use among Medicare women.

*Dr. Kussmaul is a Medical Office and task leader of HCFA's Breast Cancer Clinical Area Team for the PRO 6th Scope of Work. Her other responsibilities include clinical and technical consultation to the PROs in HCFA's Midwest Consortium. Look for Dr. Kussmaul's next article in our next issue of* ***Not Just Once****.*

# Secretary Shalala Presents
# 1 essons earned on Women s ealth

**In December 1998 Region s Ta Budetti was invited to represent CFA and the Medicare Mammography Campaign as part of Secretary Donna Shalala s delegation to Israel for a conference on Women s ealth held in the beginning of December in Jerusalem We would li e to share e cerpts of Secretary Shalala s inspiring remar s with you:**

Maimonides once said that the goal of good health is to find wisdom. For American women, the goal has been to acquire the wisdom needed to find good health. Today I want to tell you where all this progress came from. Not ten commandments. But ten lessons from our experience putting women s health on the national agenda - and keeping it there. To come up with these ten lessons, I reached back into the annals of ewish humor, wisdom, and common sense for help.

Lesson One: Remember the past. The Talmud says, every woman has a mind of her own. In the 1980s, women's health moved from outside the barricades to inside the halls of medicine. We experienced large increases in the number of women entering medical school, clinical research, bench science and teaching. At the same time, there was a renewed interest in the importance of maternal health. Fast forward to the 1990s. With more women in power - not only in health care but also in the courts, Congress, business and government - the definition of woman's health expanded dramatically. And with that expanded definition, came an expanded agenda. New research. New clinical trials. New screening programs for heart disease, cervical cancer and bone loss.

Lesson Two: Women must see their whole selves The ewish sage called the Baal Shem Tov said, "If the vision of a beautiful woman comes suddenly to mind let a man say to himself: Why be attracted to any part. Better to be drawn to the All." Exactly. But not just men. Women too. We wanted women to understand that every attribute of their lives is an attribute of their health. So we opened the door of what it means to be a healthy woman wider than it had ever been opened before.

Lesson Three: Build an army from the ground up. A great Rabbinic sage said, "Do not mistake talk for action." The point of this lesson is simple: mobilize, mobilize, mobilize. Israel has a long history of incorporating women into the Israeli Defense Forces. But there is no standing army for women's health. Our National Action Plan on Breast Cancer came about in part because 2.6 million women - organized by the National Breast Cancer Coalition - signed a petition drive. Today, new armies are focusing on making sure women have access to care - and that the care they receive is of the highest quality. Building an army is hard enough. Making sure it marches to victory is even more difficult.

Which brings me to Lesson Four: Pick the right battles and stay focused. There's a Yiddish proverb that goes: To learn the whole Talmud is a great accomplishment; to learn one good virtue is even greater. Similarly, there is virtue in not trying to do too much at once. Stay on message - as we like to say in American politics. In the United States, one message was breast cancer. In 1993, working with the National Breast Cancer Coalition and other organizations, we started the National Action Plan on Breast Cancer. At the same time we doubled discretionary spending for breast cancer research, prevention and treatment. The result of years of previous effort and this action plan is, breast cancer mortality is down - and the number of women getting mammograms is up by one-third. The battle over breast cancer was just one part of a larger battle over research. Because women had often been excluded from clinical trials - we didn't know if the data we were getting applied to women. We didn't know if particular diseases strike women and men differently. We were doing science - but we couldn t say with confidence that it was good science for women. So we picked this battle. We picked it. We fought it. And we won it

The victory for better research came in part because of Lesson Five: Find a few good friends. Ecclesiastes says, "Woe to him that is alone when he falls."

# Secretary Shalala s 1 essons earned Speech Continued

On to Lesson Six: There's a woman s health angle for almost every issue. This lesson boils down to one piece of advice: Make your issue their issue, or as an old Yiddish saying puts it: If you want people to think you're wise, agree with them. If you're working on issues that are not specifically about women's health - look for ways to build in a women's health component.

The fact is, every social or economic problem has a woman's component. How we solve these problems is answered in part by Lesson Seven: Weave your way around the opposition. There is a Midrash that says, "Even an angel cannot do two things at the same time." If an angel can't, what hope is there for the rest of us - especially when opponents who are - let's face it - less than angels stand in the way So we've learned that when it comes to women's health - go for what's attainable and build new successes on the foundation of old ones. That almost always means anticipating opposition and being ready to - deal it in, cut it off, or wait it out.

On to Lesson Eight: Think global, adapt local. There's a saying: Nine rabbis cannot make a quorum, but ten shoemakers can. This saying is not about the power of shoemakers. It's about the power of numbers. We draw strength from our sisters around the world.

In 1994 we met in Cairo and reminded the world that the health of families, communities and nations all depend on the health of women. A year later we went to Beijing where Mrs. Clinton told the world that women's rights are human rights. At one point in Beijing, we literally had to push through a line of Chinese guards that tried to keep us out of an auditorium where Mrs. Clinton was speaking. The message to those guards - and the world - was: There will be no turning back. There will be no unlinking of arms. There will be no rest until victory. We brought that spirit back to our own country and laid it at the feet of advocates for women s health in communities large and small. We said take this spirit. Adapt it to your needs. Adapt it to your cultures. Adapt it to your cause. Then your cause will be your sister's cause too.

That is Lesson Nine: Support everyday heroines. For this lesson, I chose a wonderful observation from the Talmud. It says, "A woman of sixty runs after music like a girl of six." This could be a statement about music. But I prefer to think of it as a statement about women - the lengths to which we're willing to go to achieve something of value. There's no greater value than saving the lives of women. That means those of us in government and the health professions must listen to the voices of ordinary women.

Now you're nine-tenths of the way toward institutionalizing women's health. But remember Lesson Ten: Timing is everything. There's no resisting the words of Ecclesiastes again: "To everything there is a season, and a time to every purpose under heaven." Which brings me full circle to the words of another ewish Sage, Ben Hei Hei, who said:

**We are here to do and through doing to learn**

**And through learning to now**

**And through nowing to e perience wonder**

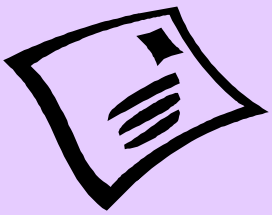
**And through wonder to obtain wisdom**

**And through wisdom to find simplicity**

**And through simplicity to give attention**

**And through attention to see what needs to be done**

**For women s health it is time again to see and do what needs to be done**



HCFA's Chicago Regional Office can provide you with full text of Secretary Shalala's 10 Lessons Learned speech. Please call Rachel Klugman at (312) 886-5352 and she will be glad to send you a copy.

**HCFA's Regional Mammography Coordinators**

# Put Our Muscle to Work For You

**Each of HCFA's regional offices is staffed with a knowledgeable mammography coordinator who can provide PROs and other partners with outreach materials, connect you with the local Cancer Information Service contact, and provide you with a variety of other resources. Call your regional mammography coordinator today and see what we can do for you!**

**Call Us Today**

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# Spotlight on Regions I and :
## CMRI s Mammography Campaign Promoting Breast Cancer Screening Among California Medicare Beneficiaries

CMRI (California Medical Review, Inc.), the California PRO, works very closely with HCFA Region IX (San Francisco) and HCFA Region X (Seattle) to increase mammography utilization among California Medicare women. CMRI provides culturally appropriate, visually attractive cancer detection information to healthcare providers, Medicare women, community groups, and media. CMRI's primary intervention strategies are aimed at informing and educating beneficiaries and their communities about the enhanced Medicare benefit by using a variety of culturally appropriate communication channels: printed health education materials; radio interviews; and print media coverage.

To assist providers with the discussion of breast health and aid with mammogram referrals, CMRI has developed mammography materials that target both healthcare providers and their patients, reinforcing the importance of physician referral and communication with older women. The culturally appropriate breast cancer education materials includes tip sheets, office posters, mammography data briefs, medical chart stickers, patient brochures and a faxback form to order additional materials. Materials can be obtained free of charge by calling **8 3 3** .

CMRI has also been actively conducting outreach efforts to California beneficiaries. In collaboration with the California Medical Association, CMRI has targeted five Northern California counties to educate seniors and physicians in Alameda, Fresno, Sacramento, San Francisco and Solano counties about the importance of annual mammograms. The campaign will soon be expanded to rural areas.

Recently, CMRI partnered with the Los Angeles Breast Cancer Education Program and other breast cancer advocates hosted a health fair at Pershing Square in Downtown Los Angeles in celebration of National Mammography Day. A partnership of local community agencies provided clinical breast exams, mammograms, and health education in an effort to increase mammography rates.

When faced with a particular breast health concern or a diagnosis of breast cancer, one of the first things a woman and her family need is current information on available resources in their location. The 1998-99 Los Angeles County Breast Health Resources uide will enable women and their families to locate the resources needed to make informed decisions about their breast health concerns. Partnered for Progress, in collaboration with CMRI, developed this publication which is available free of charge by calling **323 9 8** .

Every other month, we offer the opportunity for regional offices and PROs to share information about activities underway in their communities. We invite you to email submissions for our next issue to rklugman hcfa.gov. We'll be sure to include your update.

# Time to Reorder HCFA's Medicare Mammography Materials

As we reported in the last issue of **Not Just Once**, HCFA has been working in partnership with the National Cancer Institute (NCI) to develop a joint health promotion campaign for our Medicare mammography efforts. HCFA has adopted NCI's slogan "Mammograms: Not ust Once, But For A Lifetime " to assure a consistent message from the Department of Health and Human Services. NCI has worked to customize their breast cancer health promotion materials for our Medicare audience, and include details about the new annual mammography benefit, the Medicare 1-800 number, and HCFA's logo. The materials have been created in large print, and all are available in Spanish language. **These materials are all available free of charge to CFA s mammography partners**

HCFA has worked with NCI to develop a system where our partners can fax in an order form for these materials directly through NCI's Cancer Information Service (CIS). A copy of this order form is attached below. Rather than ordering in bulk, we request that you order on an as needed basis, limiting your order to 5,000 per item. This new system will reduce unnecessary waste, and will help ensure a more systematic process of dissemination. **Please fa the order form below directly to the Cancer Information Service at: 3 1 33 9 8**

**National Cancer Institute/Health Care Financing Administration**

**Mammography Education and Promotion Materials**

## ORDER FORM

**Name:**

**Title:**

**Organization:**

**Address:**

**City:** **Zip Code:**

**Phone:**

| Title & Contents Description | Language | Publication | Size | Quantity |
|---|---|---|---|---|
| **Mammograms… Not Just Once, But For A Lifetime** Large-print, easy to read brochure that defines mammography, describes who needs this important examination, and Medicare information. | English | H496 | 8½ x 11 | (maximum order 5000) |
| **Spanish Version — See above.** | Spanish | H497 | 8½ x 11 | (maximum order 5000) |
| **Older Woman Poster** Includes slogan with Medicare information. A poster featuring an older | English | G500 | 11 x 17 | (maximum order 5000) |
| **Spanish Version — See above.** | Spanish | G501 | 11 x 17 | |
| **Older Woman Bookmark** Includes slogan with Medicare information. Bookmark features an older | English | Z498 | 2 x 8 | (maximum order 5000) |
| **Spanish Version — See above.** | Spanish | Z499 | 2 x 8 | |
| **Pap Tests: A healthy habit for life** Large-print, easy-to-read brochure that defines Pap tests, describes who | English | H345 | 8½ x 11 | (maximum order 5000) |

The **Not Just Once Newsletter** is published bimonthly to provide timely information to HCFA's mammography partners. For more information, questions, or comments, please contact Ta Budetti or Rachel Klugman at HCFA's Chicago Regional Office, (312) 353-1753 .