



**Summary of Revisions to the
Breast and Cervical Cancer Services Policy and
Procedures Manual for FY2008 effective 9/1/2007**

The following is a summary of the significant changes to the Breast and Cervical Cancer Services (BCCS) Policy and Procedures Manual for FY2008 effective 9/1/2007. Proposed revisions published in August that did not receive any comment or have any changes made to them are not detailed in the summary. Minor modifications to the text to achieve greater clarity and consistency and updates to names, dates and web links referenced throughout the document have been made to the document, but are not reflected in the summary.

HEADING	SUMMARY OF CHANGE
Introduction – General Information	
	No Significant Changes
Section I - Administrative Policies	
	No Significant Changes
Section II - Client Services and Community Activities	
Chapter 3	Page II-8, Client Health Record - opening paragraph revised to introduce the Case Management Record
	Page II-9, Case Management Record – new
	Page II-10, Clinical Breast Examination - clarified second CBE is not required for women referred to a BCCS contractor because of abnormal CBEs or screening mammograms
	Page II-13, Components of Cervical Cancer Screening – modified to include a statement that HPV DNA testing is not reimbursable as a screening test
	Page II-16, Followup of Screening Results – paragraphs 5 and 6 revised for clarity
	Page II-27, Case Management Services - first paragraph, revised to add a note that case management does not include eligibility determination
	Page II-28, Case Management Services – paragraph 5, clarified contractors’ responsibilities and options
	Page II-29, Case Management Services – included reference to Case Management Record
	Page II-33, Breast and Cervical Cancer Treatment Act, Eligibility – revised to allow DCIS, a pre-cancerous breast diagnosis to be covered
	Page II-34, Breast and Cervical Cancer Treatment Act, Presumptive Eligibility – clarified presumptive eligibility tasks and effective date.
Section III – Reimbursement, Data Collection and Reporting Policies	
Chapter 2	Page III-11, Sanctions Due to Noncompliance with Reporting- new
Chapter 3	TWICES clarifications on Pages III-35 and III-77
Section IV – Appendix	
Appendix A	Allowable CPT Codes and Reimbursement Rates – revised to add new CPT code for case management
Appendix C	Texas Medicaid Treatment Act Qualifying Diagnosis Guidance – revised to allow DCIS, a pre-cancerous breast diagnosis to be covered