

# WELCOME

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## National Breast and Cervical Cancer Early Detection Program (NBCCEDP) Annual Grantee Survey

The Centers for Disease Control and Prevention (CDC), Division of Cancer Prevention and Control (DCPC) is assessing how DP17-1701 grantees implement the National Breast and Cervical Cancer Early Detection Program (NBCCEDP). This survey asks about your program implementation during **program year 1 (PY1)**, the time period **July 1, 2017 through June 30, 2018**.

The aims of this data collection are to better understand how you are implementing your BCCEDP and to collect information about your training and technical assistance needs; therefore, your feedback is extremely important. You should respond to this survey based upon the work conducted by your program in year 1 only.

If you have any questions about the survey content while completing it, please contact Stephanie Melillo at 770.488.4294 or [bcu6@cdc.gov](mailto:bcu6@cdc.gov). If you have technical issues in completing the survey, please contact Information Management Services, Inc. at [support@NBCCEDP.org](mailto:support@NBCCEDP.org).

*It should take approximately 45 minutes to complete the survey in one sitting.*

*Thank you for your participation.*

[Click here](#) to download a PDF copy of this survey.

[Click here](#) to download a PDF copy of the webinar slides.

Public reporting burden of this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road, NE, MS D-74, Atlanta, Georgia 30329; ATTN: PRA (0920-1046).

## INSTRUCTIONS AND DEFINITIONS

### WHO SHOULD COMPLETE THIS DATA COLLECTION?

The person responsible for the day-to-day management of the program and/or with the most program knowledge should complete this data collection.

### WHAT TIME PERIOD IS BEING ASSESSED?

We are collecting information about the implementation of your DP17-1701 NBCCEDP, program year 1 (PY1). Unless instructed otherwise, **all responses should reflect implementation of your NBCCEDP in PY1 ONLY , July 1, 2017 – June 30, 2018.**

### WHAT DO WE MEAN BY 'YOUR BCCEDP'?

The term 'Your BCCEDP' refers to all those involved in the implementation of your NBCCEDP program/program activities including you, your contractors, and your partners, regardless of the source of program funds.

### WHAT DO WE MEAN BY 'HEALTH SYSTEM'?

For purposes of this survey, when we use the term '*health system*', we mean entities delivering clinical care to a defined patient population including, but not limited to, federally qualified health centers/community health centers (FQHCs/CHCs), other publicly funded entities providing primary care, academic health care centers, health plan clinic networks, other health care networks, and hospitals. Health systems often include multiple primary care clinic sites. Insurers/health care plans, Medicaid, and Medicare may also be considered health systems given they have an applicant-defined patient population and reimburse for clinical services rendered.

### WHAT ARE THE GRANTEE STRATEGIES AND ACTIVITIES OF INTEREST?

Your program implements eight strategies to support the NBCCEDP's comprehensive and coordinated approach for the provision of breast and cervical cancer screening services for women, and reduction of barriers to accessing those services. These strategies include: (1) program collaboration, (2) external partnerships, (3) cancer data and surveillance, (4) environmental approaches for sustainable cancer control, (5) community clinical linkages, (6) health systems change, (7) program monitoring and evaluation, and (8) program management. Detailed descriptions of each of these strategies can be found on the NBCCEDP website: <https://www.cdc.gov/cancer/dcpc/pdf/dp17-1701-nbccedp-logic-model-text.pdf>.

### WHAT ARE EVIDENCE-BASED INTERVENTIONS?

Our program considers evidence-based interventions (EBIs) to be those strategies that have been reviewed and recommended by the Community Guide to Preventive Services Task Force, or the Community Guide. Definition for these strategies (Provider Assessment and Feedback, Provider Reminders, Reducing Structural Barriers, Patient (Client) Reminders, Small Media, Group Education, One on One Education and Reducing out of Pocket Costs) can be found on the Community Guide website: <https://www.thecommunityguide.org/topic/cancer>.

### WHAT IS PATIENT NAVIGATION?

Patient navigation is defined as a strategy aimed at reducing patient barriers to accessing and completing cancer screening and diagnostics. For the NBCCEDP, patient navigation is defined as *"Individualized assistance offered to clients to help overcome health care system barriers and facilitate timely access to quality screening and diagnostics as well as initiation of treatment services for women who are diagnosed with cancer"*.

## SECTION 1: RESPONDENT INFORMATION

1. With which NBCCEDP program are you affiliated?

⚠ Choose one of the following answers

Please choose... ▼

2. What is your current position within the BCCEDP program?

📌 Check all that apply

- Program director (*the primary contact for the NBCCEDP cooperative agreement*)
- Program manager/coordinator (*the day-to-day manager for the BCCEDP*)
- Other (*please specify*):

3. How long have you worked with the NBCCEDP program in your state / tribe / territory / jurisdiction / organization?

📌 Choose one of the following answers

- < 1 year
- 1-5 years
- 6-9 years
- 10+ years

## SECTION 2: MANAGEMENT, PROGRAM, AND EVALUATION CHALLENGES

1. We would like to learn more about management and programmatic challenges your organization has faced. Your responses will be used to inform the training and technical assistance (TA) offered by CDC. On a scale of 1-4 with 1 being "not a challenge", 2 being "minor challenge", 3 being "moderate challenge", and 4 being a "serious challenge," how challenging were the following issues in PY1?

Organizational Factors	1 - Not a Challenge	2 - Minor Challenge	3 - Moderate Challenge	4 - Serious Challenge
Staff furloughs/hiring freezes/turnover	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Significant changes in administrative systems and/or data systems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Loss of resources including Federal and non-Federal funds (e.g., State funds) and in-kind resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Agency reorganization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health care reform	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program Management	1 - Not a Challenge	2 - Minor Challenge	3 - Moderate Challenge	4 - Serious Challenge
Program planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ensuring accountability of sub-awardees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
External Partnerships	1 - Not a Challenge	2 - Minor Challenge	3 - Moderate Challenge	4 - Serious Challenge
Partnering with FQHCs/CHCs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Partnering with Primary Care Associations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Partnering with Health Center Control Networks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Partnering with State Quality Improvement organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Collaborating with state/tribal partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

ATTACHMENT 6: NBCCEDP ANNUAL GRANTEE SURVEY (Screenshots)

<b>Cancer Data and Surveillance</b>	<b>1 - Not a Challenge</b>	<b>2 - Minor Challenge</b>	<b>3 - Moderate Challenge</b>	<b>4 - Serious Challenge</b>
Using data to identify and/or describe priority populations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Making updates to your program's MDE data system	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Linking diagnosed women with the state registry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Environmental Approaches</b>	<b>1 - Not a Challenge</b>	<b>2 - Minor Challenge</b>	<b>3 - Moderate Challenge</b>	<b>4 - Serious Challenge</b>
Working with employers to develop worksite wellness policies/activities that promote breast and cervical cancer screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working with community organizations to implement wellness policies/activities that promote breast and cervical cancer screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Community-Clinical Linkages</b>	<b>1 - Not a Challenge</b>	<b>2 - Minor Challenge</b>	<b>3 - Moderate Challenge</b>	<b>4 - Serious Challenge</b>
Linking women to community resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Linking women to partner health systems/clinics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recruiting NBCCEDP-eligible women for breast and cervical cancer screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

ATTACHMENT 6: NBCCEDP ANNUAL GRANTEE SURVEY (Screenshots)

Health Systems Change	1 - Not a Challenge	2 - Minor Challenge	3 - Moderate Challenge	4 - Serious Challenge
Developing health system implementation plans	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enhancing EHR/HIT Systems to improve clinical tracking of completeness and timeliness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improving clinic/health system workflow processes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reaching your priority population(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Implementing client reminders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Implementing reducing structural barriers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Implementing provider reminders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Implementing provider assessment and feedback	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performance Monitoring and Evaluation	1 - Not a Challenge	2 - Minor Challenge	3 - Moderate Challenge	4 - Serious Challenge
Developing an evaluation plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working with external evaluators	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obtaining accurate breast and/or cervical cancer clinic-level screening rates from EHRs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Collecting CDC-required MDEs for navigated-only women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Collecting CDC-required clinic data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Analyzing your evaluation data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using evaluation data (e.g., MDEs, clinic data) for program improvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

ATTACHMENT 6: NBCCEDP ANNUAL GRANTEE SURVEY (Screenshots)

Additional Potential Programmatic Issues	1 - Not a Challenge	2 - Minor Challenge	3 - Moderate Challenge	4 - Serious Challenge
Other Programmatic Issue #1 <i>(please specify)</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Programmatic Issue #2 <i>(please specify)</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Programmatic Issue #3 <i>(please specify)</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1A. Other Programmatic Issue #1 *(please specify)*



1B. Other Programmatic Issue #2 *(please specify)*

1C. Other Programmatic Issue #3 *(please specify)*

ATTACHMENT 6: NBCCEDP ANNUAL GRANTEE SURVEY (Screenshots)

2. On a scale of 1-4 with 1 being "did not use", 2 being "used, but not useful", 3 being "useful", and 4 being a "very useful," how useful have you found the following technical assistance resources in PY1?

Technical Assistance Resources	1 - Did Not Use	2 - Used, But Not Useful	3 - Useful	4 - Very Useful
Measuring Breast, Cervical, and Colorectal Cancer Screening Rates in Health System Clinics: Guidance Document	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinic Data Collection Forms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinic Data Dictionaries – Breast and Cervical	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MDE Data Dictionary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MDE Users' Manual	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MDE Feedback Reports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CDC NBCCEDP DP17-1701 Program Manual	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EBI Implementation Briefs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
State Maps reflecting burden areas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CDC Webinars	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NBCCEDP Evaluation Network	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
On-going TA provided by CDC Program Consultants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluation/Data collection & reporting TA from CDC or IMS	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other TA Resource #1 (please specify one resource)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other TA Resource #2 (please specify one resource)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other TA Resource #3 (please specify one resource)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2A. Other TA Resource #1 *(please specify one resource)*

2B. Other TA Resource #2 *(please specify one resource)*

2C. Other TA Resource #3 *(please specify one resource)*

## SECTION 3: PROGRAM RESOURCES

1. Please list the amount of Federal, State, Tribal, non-profit, university and other funding that supported your BCCEDP program in PY1. Please pro-rate funding if needed to associate with PY1, July 1, 2017 – June 30, 2018. Do **not** include in-kind resources.

**ⓘ Your answer must be an integer between 0 and 99999999. Enter '0' if funding was not received (for any of the options below, including Other).**

Federal <i>(Do not include funds received from CDC through DP17-1701 NBCCEDP)</i>	\$	<input type="text"/>	.00
State	\$	<input type="text"/>	.00
Tribal	\$	<input type="text"/>	.00
Non-profit <i>(e.g., American Cancer Society, LIVESTRONG)</i>	\$	<input type="text"/>	.00
University <i>(e.g., other grant funds, internal university funds)</i>	\$	<input type="text"/>	.00
Other funding sources <i>(please specify)</i>	\$	<input type="text"/>	.00

1A. Other funding sources *(please specify)*

## SECTION 4: PARTNERSHIPS

1. Did your organization partner with any of the following organizations to assist in implementing BCCEDP program activities in PY1?

**Check all that apply**

- American Cancer Society
- State primary care association
- State quality improvement agency
- Medicare quality improvement organization
- Health center control network
- Regional extension center
- Public health focused non-profit organization
- Community-based organization *(including faith-based organizations)*
- Professional association
- Local or regional health departments
- Business association
- Private EHR vendor *(e.g., EHR software vendor, data warehouse)*
- Academic institution
- Accountable care organization
- Health care collaborative
- Health care plan/insurer
- Other *(please specify):*
- We did not partner with any of these organizations/groups

2. Did your organization provide CDC DP17-1701 funding to the **American Cancer Society** to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

3. Does your organization/program have a written MOU or MOA with the **American Cancer Society** related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

4. During PY1, which of the following NBCCEDP program activities were implemented in partnership with the American Cancer Society?

**📌 Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*



5. Did your organization provide CDC DP17-1701 funding to **state primary care associations** to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

6. Does your organization/program have a written MOU or MOA with **state primary care associations** related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

7. During PY1, which of the following NBCCEDP program activities were implemented in partnership with state primary care associations?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

8. Did your organization provide CDC DP17-1701 funding to state quality improvement agencies to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

9. Does your organization/program have a written MOU or MOA with state quality improvement agencies related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

10. During PY1, which of the following NBCCEDP program activities were implemented in partnership with state quality improvement agencies?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

11. Did your organization provide CDC DP17-1701 funding to Medicare quality improvement organizations to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

12. Does your organization/program have a written MOU or MOA with Medicare quality improvement organizations related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

13. During PY1, which of the following NBCCEDP program activities were implemented in partnership with Medicare quality improvement organizations?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

14. Did your organization provide CDC DP17-1701 funding to **health center control networks** to assist in implementing NBCCEDP program activities in PY1?

ⓘ Choose one of the following answers

- Yes
- No

15. Does your organization/program have a written MOU or MOA with **health center control networks** related to the NBCCEDP?

ⓘ Choose one of the following answers

- Yes
- No

16. During PY1, which of the following NBCCEDP program activities were implemented in partnership with health center control networks?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*



17. Did your organization provide CDC DP17-1701 funding to regional extension centers to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

18. Does your organization/program have a written MOU or MOA with regional extension centers related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

19. During PY1, which of the following NBCCEDP program activities were implemented in partnership with regional extension centers?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

20. Did your organization provide CDC DP17-1701 funding to **public health focused non-profit organizations** to assist in implementing NBCCEDP program activities in PY1?

**Choose one of the following answers**

- Yes
- No

21. Does your organization/program have a written MOU or MOA with **public health focused non-profit organizations** related to the NBCCEDP?

**Choose one of the following answers**

- Yes
- No

22. During PY1, which of the following NBCCEDP program activities were implemented in partnership with public health focused non-profit organizations?

📌 Check all that apply

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

23. Did your organization provide CDC DP17-1701 funding to **community-based organizations** (*including faith-based organizations*) to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

24. Does your organization/program have a written MOU or MOA with **community-based organizations** (*including faith-based organizations*) related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

25. During PY1, which of the following NBCCEDP program activities were implemented in partnership with **community-based organizations** (including faith-based organizations)?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers (not including patient navigation)
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities (e.g., improve use of electronic health record systems)
- Other program activities (please describe):

26. Did your organization provide CDC DP17-1701 funding to professional associations to assist in implementing NBCCEDP program activities in PY1?

📌 Choose one of the following answers

- Yes
- No

27. Does your organization/program have a written MOU or MOA with professional associations related to the NBCCEDP?

📌 Choose one of the following answers

- Yes
- No

28. During PY1, which of the following NBCCEDP program activities were implemented in partnership with professional associations?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*



29. Did your organization provide CDC DP17-1701 funding to **local or regional health departments** to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

30. Does your organization/program have a written MOU or MOA with **local or regional health departments** related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

31. During PY1, which of the following NBCCEDP program activities were implemented in partnership with local or regional health departments?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

32. Did your organization provide CDC DP17-1701 funding to **business associations** to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

33. Does your organization/program have a written MOU or MOA with **business associations** related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

34. During PY1, which of the following NBCCEDP program activities were implemented in partnership with business associations?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

35. Did your organization provide CDC DP17-1701 funding to private EHR vendors (e.g., EHR software vendor, data warehouse) to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

36. Does your organization/program have a written MOU or MOA with private EHR vendors (e.g., EHR software vendor, data warehouse) related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

37. During PY1, which of the following NBCCEDP program activities were implemented in partnership with private EHR vendors (e.g., EHR software vendor, data warehouse)?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers (not including patient navigation)
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities (e.g., improve use of electronic health record systems)
- Other program activities (please describe):

38. Did your organization provide CDC DP17-1701 funding to **academic institutions** to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

39. Does your organization/program have a written MOU or MOA with **academic institutions** related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

40. During PY1, which of the following NBCCEDP program activities were implemented in partnership with academic institutions?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*



41. Did your organization provide CDC DP17-1701 funding to **accountable care organizations** to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

42. Does your organization/program have a written MOU or MOA with **accountable care organizations** related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

43. During PY1, which of the following NBCCEDP program activities were implemented in partnership with **accountable care organizations**?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

44. Did your organization provide CDC DP17-1701 funding to **health care collaboratives** to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

45. Does your organization/program have a written MOU or MOA with **health care collaboratives** related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

46. During PY1, which of the following NBCCEDP program activities were implemented in partnership with health care collaboratives?

**Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

47 Did your organization provide CDC DP17-1701 funding to **health care plans/insurers** to assist in implementing NBCCEDP program activities in PY1?

**!** Choose one of the following answers

- Yes
- No

48. Does your organization/program have a written MOU or MOA with **health care plans/insurers** related to the NBCCEDP?

**!** Choose one of the following answers

- Yes
- No

49. During PY1, which of the following NBCCEDP program activities were implemented in partnership with health care plans/insurers?

**📌 Check all that apply**

- Evaluation and performance measurement
- Provider assessment and feedback
- Provider reminders
- Patient reminders
- Reducing structural barriers *(not including patient navigation)*
- Reducing out of pocket costs
- Small media
- Group education
- One-on-One education
- Patient navigation
- Community outreach
- Professional development/Provider education
- Quality improvement activities
- Implementing policies to promote breast and cervical cancer screening
- Administrative support
- Facilitating linkage to medical home
- Health information technology (HIT) activities *(e.g., improve use of electronic health record systems)*
- Other program activities *(please describe):*

50. During PY1, did your BCCEDP participate in a DP17-1701 Leadership Team?

**!** Choose one of the following answers

- Yes
- No

51. During PY1, did your BCCEDP partner with other CDC-funded programs?

**!** Choose one of the following answers

- Yes (please list program(s)):
- No

## SECTION 5: HEALTH SYSTEMS CHANGE FOR SCREENING DELIVERY

### A. CLIENT ELIGIBILITY CRITERIA

Please describe who was eligible for screening and diagnostic services through your BCCEDP program, based on your program's **general** eligibility requirements, including Federal Poverty Level, age, and insurance status.

1. During PY1, what Federal Poverty Level (FPL) was used to determine eligibility for clients receiving NBCCEDP-funded clinical (*screening/diagnostic*) services?

ⓘ Choose one of the following answers

ⓘ Only numbers may be entered in 'Other % FPL (please specify):' accompanying text field.

250% FPL

200% FPL

Other % FPL (please specify):



2. During PY1, at what age were average risk women eligible for screening in your program?

*(Do not report exceptions for special circumstances, e.g., younger women if symptomatic, higher risk, or rarely/never screened.)*

**!** Please enter an integer between 18 and 99. If you do not provide the specific testing, enter '99'.

Minimum age for mammography screening:  years

Minimum age for Pap test:  years

Minimum age for Pap with HPV co-testing:  years

3. During PY1, were under-insured clients eligible to receive clinical services through your BCCEDP?

*(Under-insured are clients who are insured but cannot afford their insurance co-pay or deductible or whose insurance plan does not cover cancer screening.)*

**!** Choose one of the following answers

Yes

No

4. During PY1, what percentage of clients receiving screening and/or navigation services through your BCCEDP program were **under-insured**?

**!** Please enter an integer between 0 and 100. If you do not know the percentage, enter '999'.

Percentage of under-insured women:

%

B. BCCEDP CLINIC SERVICE REIMBURSEMENT MODEL AND DATA USE

5. During PY1, which payment reimbursement model best describes how your BCCEDP program paid for screening and diagnostic clinical services?

**📌 Check all that apply**

- Our organization provides clinical services directly
- Fee for service *(Provider bills and is reimbursed for services/procedures performed; may be managed internally by the grantee or externally by contractor, third party payer, etc.)*
- Capitated payment *(A uniform reimbursement rate per person served is established for a specified group of screening and/or diagnostic services.)*
- Bundled payment *(Reimbursement model where rates are established according to tiered case outcomes and are reimbursed retrospectively)*
- Employed/Contracted Service Provider *(Grantee uses NBCCEDP funds to employ or contract with service providers for screening and/or diagnostic services; uses other vendor for cytology, radiology, etc.)*
- Other payment model *(please specify):*

C. BCCEDP PROVIDER SITES

6. In the table below, please enter the number of individual **primary care sites** that delivered NBCCEDP screening/diagnostic services (including mammography referrals) in PY1 according to the type of provider setting. Please provide the number of **sites or clinics**, not the number of contracts. Do **not** include specialty clinics (e.g., *mammography centers, labs*).

**ⓘ Please enter an integer between 0 and 9999. If no sites of this type participated, enter '0'. If this type of site participated, but you do not know the number of sites, enter '9999'.**

Federally Qualified Health Centers or Community Health Centers

sites

Indian Health Service or other tribal health organization sites or clinics

sites

Individual or groups of primary care provider (PCP) sites or clinics, **not including FQHCs**

sites

Health care systems, hospitals, or clinics associated with an insurer (e.g. VA, Kaiser)

sites

Other primary care sites (*please specify below*)

sites

6A. Other primary care sites *(please specify)*

D. PATIENT NAVIGATION (PN)

7. In PY1, how many women were navigated by your BCCEDP:

**ⓘ Please enter an integer between 0 and 50000. If you do not know the number of women, enter '99999'.**

For screening services?

women

Among those navigated for cancer screening, how many completed screening?

women

For diagnostic services?

women

Among those navigated for cancer diagnostics, how many completed diagnostics?

women

8. How do you determine screening and/or diagnostic completion for the women receiving navigation?

**Choose one of the following answers**

- Self-reported by the woman
- Medical record verification
- Other (please specify):

9. During PY1, how did your BCCEDP program support PN activities?

**Check all that apply**

- Did not implement Patient Navigation activities
- Grantee staff served as PNs
- Funding through a contract for FTE support for PNs
- Reimbursement to providers/clinics for PN services on a per-patient basis
- Bundled payment model where PN is included as a service
- In-kind support for PNs from a community partner/program/clinic
- Other (please specify):

10. What model(s) does your BCCEDP program use to deliver patient navigation services?

**📌 Check all that apply**

- A centralized model (i.e. staff funded at the state or regional level provide PN to patients at multiple clinics/health systems)
- A decentralized model (i.e. staff within individual clinics or health systems provide PN to patients within that clinic/health system)
- Other model (please specify):



## SECTION 6: EBI IMPLEMENTATION FOR HEALTH SYSTEMS CHANGE

1. During PY1, who provided implementation support/technical assistance for EBI-related activities to your partner health systems and/or clinics?

**📌 Check all that apply**

- BCCEDP staff members
- Health Care Control Network (HCCN) or Regional Extension Center (REC)
- Local or regional health department
- Academic institution
- Clinical care support organization (e.g., state primary care association, state QA/QI, Medicare QI organization, professional association, accountable care organization)
- Community based organization (including faith-based organizations)
- Health care plan/insurer
- Public health focused non-profit organization (e.g., American Cancer Society)
- Business/Consulting (e.g., business association, EHR Vendor)
- Other partner(s) (please name):
- Did not provide

2. We would like to learn more about how your BCCEDP is funding EBI implementation within your partner health systems/clinics. During PY1, how many of your clinics received financial support from your BCCEDP to support EBI implementation? Funding could be either directly from the awardee organization (*i.e., grantee contracts with health system or clinic*) or indirectly through a sub-awardee (*i.e., your sub-awardee contracted with a health system or clinic*).

**📌 Choose one of the following answers**

- All
- Most
- Some
- None

3. What was your greatest success in working with health system clinics to implement EBIs? (*please describe*)

## SECTION 7: OTHER STRATEGIES FOR SUSTAINABLE CANCER CONTROL

### A. ENVIRONMENTAL APPROACHES FOR SUSTAINABLE CANCER CONTROL

1. In PY1, did your organization partner with any worksites to develop and/or implement any policies/activities to promote breast and cervical cancer screening?

**!** Choose one of the following answers

- Yes
- No

2. What types of worksite-related activities were implemented at these worksites in PY1? Please describe.

3. Did your BCCEDP implement any other environmental approaches to increase breast and cervical cancer screening rates in PY1?

**!** Choose one of the following answers

- Yes (please describe):
- No

## B. COMMUNITY CLINICAL LINKAGES

4. In PY1, did you link women to any of the following?

**!** Check all that apply

- Community resources
- Medical homes
- Health care clinic for cancer screening/diagnostics/treatment
- Genetic/genomic counselling or testing
- Other (please specify):
- None of these

5. What types of activities did you conduct to facilitate these linkages in PY1? Please describe.

6. Did you engage CHWs or PNs to do this work?

**!** Choose one of the following answers

- Yes
- No

7. Did your BCCEDP implement any other community-clinical linkages to increase breast and cervical cancer screening rates in PY1?

**!** Choose one of the following answers

- Yes (please describe):
- No