



**519.5 CANCER SCREENINGS**

**TABLE OF CONTENTS**

<b>SECTION</b>	<b>PAGE NUMBER</b>
Background .....	2
Policy .....	2
519.5.1 Colorectal Cancer Screenings .....	2
519.5.2 Prostate Cancer Screenings .....	2
519.5.3 Breast Cancer Screenings .....	2
519.5.4 Cervical Cancer Screenings .....	2
519.5.5 West Virginia Breast and Cervical Cancer Screening Program (BCCSP) .....	3
Glossary .....	3
Change Log .....	3

**DISCLAIMER:** This chapter does not address all the complexities of Medicaid policies and procedures, and must be supplemented with all State and Federal Laws and Regulations. Contact BMS Fiscal Agent for coverage, prior authorization requirements, service limitations, and other practitioner information.



## 519.5 CANCER SCREENINGS

### BACKGROUND

West Virginia Medicaid covers various types of cancer screening that include, but are not limited to, colorectal cancer screenings, prostate cancer screenings, breast cancer screenings, and cervical cancer screenings.

### POLICY

#### 519.5.1 COLORECTAL CANCER SCREENINGS

West Virginia Medicaid covers colorectal cancer screening tests for high risk members and for members aged 45 and over. Characteristics of the individual at high risk for developing colorectal cancer include:

- Close relative (sibling, parent, or child) who has had colorectal cancer or an adenomatous polyp.
- Family history of adenomatous polyposis.
- Family history of hereditary nonpolyposis colorectal cancer.
- Personal history of adenomatous polyps.
- Personal history of colorectal cancer.
- Inflammatory bowel disease, including Crohn's disease and ulcerative colitis.

#### 519.5.2 PROSTATE CANCER SCREENINGS

West Virginia Medicaid covers yearly digital rectal examination of the prostate for cancer screening, but makes no separate payment for this exam as it is included as part of the Evaluation and Management (E&M) service. Prostate specific antigen (PSA) testing CPT code is covered for susceptible populations when the appropriate counseling regarding the potential for false negative/positive results and for over-diagnosis of prostate cancer has been discussed with the patient. Other covered prostate screening and testing services may require prior authorization by the Utilization Management Contractor (UMC). Refer to the [UMC web portal](#) for a list of services requiring prior authorization.

#### 519.5.3 BREAST CANCER SCREENINGS

Only one screening mammography is covered per year. All facilities providing these services are required to have FDA certification under the [Mammography Quality Standards Act of 1992](#) (MQSA). MQSA requires that all mammography facilities in the United States meet certain stringent quality standards, be accredited by a Food and Drug Administration (FDA)-approved accreditation body, and be inspected annually.

Physicians providing an interpretation/report for mammographies performed in MQSA approved facilities may order a diagnostic mammogram based on the findings of a screening mammogram even though the physician does not treat the member, in accordance with [42 CFR 410.32](#).

#### 519.5.4 CERVICAL CANCER SCREENINGS

The West Virginia Medicaid program covers one Pap smear per calendar year for cervical cancer screening in susceptible populations. A separate reimbursement for obtaining the Pap smear is not allowed, as this is considered part of the E&M service and examination. The laboratory CPT code for Pap



## 519.5 CANCER SCREENINGS

smear is only paid to the pathology facility actually reading the smear. A separate specimen handling charge is not covered.

### 519.5.5 WEST VIRGINIA BREAST AND CERVICAL CANCER SCREENING PROGRAM (BCCSP)

The [WV Breast and Cervical Cancer Screening Program](#) (BCCSP) is administered by the West Virginia DHHR Bureau for Public Health and provides statewide screening services free of charge or at a minimal fee to low income and uninsured or underinsured women. Refer to <http://www.wvdhhr.org/bccsp/> for additional information.

The Breast and Cervical Cancer Prevention and Treatment Act of 2000 ([Public Law 106-354](#)), gave states the option to provide medical assistance through Medicaid to eligible women who were screened through the [Centers for Disease Control and Prevention's \(CDC\) National Breast and Cervical Cancer Early Detection Program](#) (NBCCEDP) and found to have breast or cervical cancer, including pre-cancerous conditions. Qualifying patients are eligible for Medicaid benefits only while undergoing active treatment for the cancer.

### REFERENCES

The West Virginia State Plan references the Breast and Cervical Screening Program at [section 2.2-A](#) Optional Coverage Groups.

### GLOSSARY

Definitions in [Chapter 200, Definitions and Acronyms](#) apply to all West Virginia Medicaid services, including those covered by this chapter.

### CHANGE LOG

REPLACE	TITLE	EFFECTIVE DATE
Entire Chapter	Cancer Screenings	January 15, 2016
519.5.1	Colorectal Cancer Screenings	May 1, 2021