

ScreenWise Program Update: June 2019

Announcement:

We are excited to announce that our team now has a ScreenWise Health Systems Coordinator, Stefanie Krupp. She comes to our program from the Office of the State Public Health Director, where she worked as the Quality Improvement Coordinator for the Public Health Division, supporting programs with QI, project management, and strategic planning. She brings experience as a licensed healthcare provider and adult education and public health program support along with a passion for health equity and improving population health outcomes. She recently completed the Institute for Healthcare Improvement certificate program in Quality and Safety. She is excited to help ScreenWise further our health systems efforts.

Survey Reminders:

All enrolling providers should have received the ScreenWise Enrolling Provider Survey, with a due date of June 10th, 2019. Thank you all for your participation. This survey will help better serve patients with current and accurate referral services for providers. Please let us know if you did not receive a survey or had difficulty submitting your answers.

Billing Reminder – ScreenWise must be the only payor for covered services:

Patients who have insurance, but not enough to meet their needs, may be eligible for ScreenWise services if they meet all other eligibility criteria. If the patient is enrolled in ScreenWise and has other insurance, the provider must bill only ScreenWise. ScreenWise is the payor of last and only resort and cannot act as a secondary payor, nor can the amount be applied toward a patient deductible. Providers must accept ScreenWise reimbursement rates for billed services as payment in full. For more information, please refer to the ScreenWise Program Manual located on our website at www.health.oregon.org/screenwise

Reminders for enrolling and re-enrolling patients into the ScreenWise Program:

Here are some error trends and tips for successful completion of the ScreenWise Intake Packet:

- All questions need to be answered on all 3 pages of the intake packet. Even though the patient is often filling out the patient-facing first page, it is the clinic's responsibility to see that all questions have been correctly answered before submitting to ScreenWise.
 - Most common omission by patients (page 1 patient demographics) is **date of birth**
 - Most common omission by clinic staff (page 3 screening services) is **CBE result**.
- Patient Service dates need to be reported as follows:
 - 'Previous Pap' is the last known Pap date rather than the current date of service.
 - 'CBE date', 'Pap date', 'HPV' reflects the current screening tests ordered. Remember, this is a snapshot of the patient's current needs rather than what they had done previously. If no CBE or Pap was done at the time of enrollment, leave the CBE/Pap date blank and indicate if the patient is proceeding directly for diagnostics or that no CBE/Pap/HPV was ordered.

Questions? Please contact ScreenWise at ScreenWise.Info@dhsosha.state.or.us