COLORADO DEPARTMENT OF
PUBLIC HEALTH & ENVIRONMENT
Women's Wellness Connection

WOMEN'S WELLNESS connection
Connect. Get checked. Be well.

10 - Procedures Not Covered by Requested Funder
Cheat Sheet

Report Statement	What it means	What information we need
Cold Knife cone not approved by State	This procedure is not a WWC-covered procedure. Preapproval for coverage is required	Did WWC staff approve this procedure? Contact WWC staff for approval or change funding source.
Endometrial biopsy not approved by the State	This procedure is not a WWC-covered procedure. Preapproval for coverage is required	Did WWC staff approve this procedure? Contact WWC staff for approval or change funding source.
Expired enrollment date	Enrollment date is not in the current fiscal year, or is older than the procedure date	Complete a Patient History form to re-enroll patient. Update the Enrollment Date field on the patient information screen.
HPV paid only after ASCUS pap	HPV test is only WWC-eligible when Pap result is ASCUS, or with pre-approval after a previous abnormal Pap resulted in a Colposcopy with HPV test recommended as short-term follow-up.	Verify Pap result and indicate on the clinical services report (CSR). Contact WWC staff for approval or change funding source.
Invalid Age	Age is not reported or patient is too young for the program at time of procedure.	Verify patient's date of birth and update the patient information screen.
Invalid Ethnicity	Ethnicity (Hispanic or not Hispanic) indicated as "Unknown at this Time."	Indicate patient's ethnicity on patient information screen.
Invalid Hysterectomy Status	Hysterectomy status indicated as Unknown at this Time.	Indicate patient's hysterectomy status on the Medical History section of the CSR.
Invalid Insurance/Medicare	Patient not eligible due to insurance/Medicare.	Verify patient's insurance / Medicare status and update the patient information screen.
Invalid Percent of Poverty	Monthly income is not reported or is over 250% of poverty.	Verify *monthly* income and update information on the patient information screen.
Invalid Performed Date	Date of procedure was missing or is incorrect on the CSR.	Correct the procedure date on the CSR.
Invalid Race	Race indicated as "Unknown at this Time."	Indicate patient's race on the patient information screen.
Invalid Result	Result indicated as "Unknown at this Time."	Update result for this procedure on CSR.
Legal Presence not checked	Verified Legal Presence checkbox on patient information screen is not checked.	Verify that legal presence documentation is in the patient file and check this box.
More than 2 Paps in allowed time period	A liquid-based or conventional Pap smear was repeated too soon.	Check that Pap performed meets Pap screening guidelines in WWC toolkit. Navigate to Provider Information link from www.cohealthsource.org

Continued

Report Statement	What it means	What information we need
No Mam exists requiring film comparison on CSR	There is no screening Mam with the result of “Film Comparison required,” or “Needs Additional Imaging”.	Check the screening Mam result. Change the diagnostic result or add a film comparison or change the type of diagnostic procedure.
No Previous Paid Screenings last 12 months	A WWC-paid screening needs to precede diagnostics or the patient must have been referred into the program for diagnostics with funding source for previous screenings other than WWC.	Enter screenings on the CSR and indicate WWC as funding source. Or, indicate Mam or Pap reason as “Patient referred in for DX evaluation.” Screenings may then be funded as a source other than WWC.
Not a WWC covered procedure	This procedure is not a WWC-covered procedure.	Did WWC staff approve this procedure? Contact WWC staff for approval or change funding source.
Not covered by Contract Dates	Procedure date is prior to beginning contract date.	WWC cannot cover this procedure. Change the funding source.
Paid procedure last 10 months	The same procedure was done within the last year.	If this is short-term follow up, indicate this on the CSR.
Pap not 22 months after Liquid-based Pap	A liquid-based Pap smear was repeated too soon.	If this is short-term follow up, indicate this on the CSR Check that Pap performed meets Pap screening guidelines in WWC toolkit.
Patient ineligible for Pap test	Patient has had a hysterectomy unrelated to cervical neoplasia.	Is hysterectomy status correct? If so, change funding source.
Patient under 50/No Symptoms, History Indicated	WWC pays for mammogram for women under 50 who are symptomatic or who have a family or personal cancer history	Check “new symptoms,” or “family/personal breast cancer” box on the CSR.
Received same service within 10 months	The same procedure was done within the last year.	Is this short-term follow up? Indicate this on the CSR.

After completing updates, run Report 10 again. There may be more than one item of incomplete or incorrect data, and the submission still may not be ready for payment. This report will display one item at a time until all data entry issues are resolved.