

**NC BCCCP Eligibility FAQ**  
**Frequently Asked Questions**  
**About Eligibility for the**  
**NC Breast and Cervical Cancer Control Program**

**Who Should Receive NC BCCCP Services?**

**1. If a woman has only cervical screening, only breast screening, or only diagnostic services will she count toward my service goals?**

Yes. Each woman enrolled in NC BCCCP is not required to have a complete work-up including all cervical cancer and breast cancer screening services. Depending on individual circumstances and clinical protocols, it may be appropriate to provide only cervical cancer screening, only breast cancer screening, or only diagnostic work-up.

**2. Which NC BCCCP patients are eligible for screening mammograms?**

Low income (<250% FPL) uninsured and underinsured women ages 40-64 who do not have Medicaid, Medicare (Part B) or Title X (Family Planning) are eligible for NC BCCCP-funded mammograms. Symptomatic women who are under the age of 40 or women who are found to be at high risk for developing breast cancer may be enrolled and receive NC BCCCP services.

**3. Are NC BCCCP patients who are less than 40 years old eligible for a mammogram?**

Yes. A diagnostic mammogram may be provided for women younger than 40 who present with clinical symptoms suspicious for breast cancer. An annual screening mammogram may be provided for women 30 years and older who are determined to be high-risk for developing breast cancer per breast cancer risk assessment.

**4. If women under age 40 are not eligible for a mammogram, what screening services can be provided?**

Eligible women ages 21-39 may have the following services provided:

- Clinical breast exam and cervical cytology (Pap test) with pelvic exam
- Assessment of history and risk assessment for cancer
- Breast self-exam (BSE) instruction if the patient requests

**5. Can a woman who has had a bilateral mastectomy receive clinical breast exam (CBE) services and breast cancer screening services through NC BCCCP?**

Yes, patients are eligible to receive services once breast cancer treatment is complete.

**6. Are women with implants eligible for NC BCCCP?**

Yes.

**7. Which NC BCCCP patients are eligible for cervical cancer screening?**

Low income (<250% FPL), uninsured and/or underinsured women ages 21-64 years old who have an intact cervix and do not have Medicaid, Medicare (Part B) or Title X (Family Planning) are eligible for dual-funded BCCCP-provided age-appropriate cervical cancer screening (including cervical cytology and/or high-risk HPV testing). A minimum of 35% of the women screened with NC BCCCP funds should be women who have never been screened for cervical cancer or not been screened within the past 10 years. Of note, NC BCCCP must be the payor of last resort. For instance, Title X (Family Planning) covers cervical cytology but not cervical diagnostic services. Patients enrolled in Title X (Family Planning) would not be eligible for cervical cytology through NC BCCCP but would qualify to receive cervical diagnostic services.

Women who have had a total hysterectomy with removal of the cervix for any reason other than cervical cancer or dysplasia are not eligible for NC BCCCP cervical cancer screening.

**8. If a patient is not eligible for cervical cytology, should I provide a pelvic exam?**

Do not provide a NC BCCCP-funded pelvic exam if cervical cytology is not provided. The only exception is if a woman is a new patient and does not know if she still has a cervix. You may provide a one-time only pelvic exam to determine if the patient's cervix remains.