



November 21, 2024

Submitted electronically via <https://www.womenspreventivehealth.org/public-comment/>

Subject: Notice of Request for Public Comments on Draft Recommendations for the HRSA-Supported Women's Preventive Services Guidelines Relating to Screening and Counseling for Intimate Partner and Domestic Violence

Covered California and the California Public Employees' Retirement System (CalPERS) are writing in response to your request for public comment accompanying the Proposed Updates to the Health Resources and Services Administration (HRSA)-supported Women's Preventive Services Guidelines. Covered California ensures nearly 1.8 million Californians have access to equitable, high-quality care through 15 health plans, including Essential Health Benefits and preventive care aligned with HRSA guidelines. CalPERS, the largest commercial health benefits purchaser in California, secures comprehensive health benefits for approximately 1.5 million state and local government employees and their families, focusing on quality, equity, and accessibility. The comments in this letter refer to the proposed updates to screening and counseling for intimate partner and domestic violence. Separately, we also submitted comments on the proposed guidelines relating to breast cancer screening for women at average risk and guidelines relating to patient navigation for breast and cervical cancer screening.

We strongly support HRSA's proposed updates to screening and counseling for intimate partner and domestic violence. Establishing continuous care frameworks that include both in-person and telehealth options for follow-up is a critical step toward ensuring long-term support. Telehealth can serve as a valuable tool for individuals in rural or isolated areas where in-person care may be less available, enabling survivors to maintain consistent communication with healthcare providers. By expanding access to flexible follow-up options, we can help prevent gaps in care for those who need it. Additionally, we urge HRSA to update its guidelines to use more inclusive language, such as replacing "women" with "individuals" or "patients" to reflect the reality that intimate partner violence affects people across all gender identities. This change will ensure that the guidelines are sensitive to the needs of all individuals who may experience such violence, regardless of their gender identity or expression.

We thank HRSA for the opportunity to provide feedback on the proposed updates to the Women's Preventive Services Guidelines. We look forward to seeing the continued efforts of HRSA to support and expand preventive care across the nation.

Sincerely,

Jessica Altman
Executive Director
Covered California

Marcie Frost
Chief Executive Officer
CalPERS



November 21, 2024

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Subject: Notice of Request for Public Comments on Draft Recommendations for the HRSA-Supported Women's Preventive Services Guidelines: Breast Cancer Screening for Women at Average Risk

Covered California and the California Public Employees' Retirement System (CalPERS) are writing in response to your request for public comment accompanying the Proposed Updates to the Health Resources and Services Administration (HRSA)-supported Women's Preventive Services Guidelines. Covered California ensures nearly 1.8 million Californians have access to equitable, high-quality care through 15 health plans, including Essential Health Benefits and preventive care aligned with HRSA guidelines. CalPERS, the largest commercial health benefits purchaser in California, secures comprehensive health benefits for approximately 1.5 million state and local government employees and their families, focusing on quality, equity, and accessibility. The comments in this letter refer to the proposed guidelines relating to breast cancer screening for women at average risk. Separately, we also submitted comments on the proposed updates to screening and counseling for intimate partner and domestic violence and guidelines relating to patient navigation for breast and cervical cancer screening.

We commend HRSA for recognizing the importance of follow-up imaging and pathology in breast cancer screening. Ensuring coverage for additional work-up of abnormal screening results, including MRIs or biopsies, is crucial for comprehensive cancer detection. Initial mammography may provide an incomplete assessment, especially with dense breast tissue. Coverage of follow-up imaging and biopsy will allow for more accurate diagnoses and improved patient outcomes during the screening process.

We recommend the use of digital mammography, when available, instead of film mammography for individuals with dense breast tissue to increase the sensitivity of screening. The importance of understanding and reducing racial disparities in diagnosis of more advanced breast cancer (Black vs. White = 46 percent vs. 36 percent at time of diagnosis) and in breast cancer-specific mortality (Black vs. White = 30 vs. 21 deaths per 100,000 women¹) should be emphasized. Lastly, we propose the use of inclusive terminology in the guidelines by replacing "women" with "people at risk of breast cancer" to reflect the diverse population at risk for breast cancer, including transgender and non-binary individuals.

We thank HRSA for this opportunity to provide feedback on the proposed updates to the Women's Preventive Services Guidelines.

Sincerely,

Jessica Altman
Executive Director
Covered California

Marcie Frost
Chief Executive Officer
CalPERS

¹ Richardson LC, Henley SJ, Miller JW, Massetti G, Thomas CC, Patterns and Trends in Age-Specific Black-White Differences in Breast Cancer Incidence and Mortality- US, 1999-2014, 2016, Center for Surveillance, Epidemiology, and Laboratory Services, Centers for Disease Control and Prevention (CDC), U.S. Department of Health and Human Services, Atlanta, GA



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Subject: Notice of Request for Public Comments on Draft Recommendations for the HRSA-Supported Women's Preventive Services Guidelines: Patient Navigation for Breast and Cervical Cancer Screening

Covered California and the California Public Employees' Retirement System (CalPERS) are writing in response to your request for public comment accompanying the Proposed Updates to the Health Resources and Services Administration (HRSA)-supported Women's Preventive Services Guidelines. The comments in this letter refer to the proposed guidelines relating to patient navigation for breast and cervical cancer screening. Separately, we also submitted comments on the proposed updates to screening and counseling for intimate partner and domestic violence and guidelines relating to breast cancer screening for women at average risk.

We fully support the inclusion of patient navigation services in the guidelines. Research demonstrates that these services significantly enhance cancer screening rates and reduce disparities in cancer morbidity and mortality, particularly among low-income and underserved populations. To strengthen their effectiveness, we recommend HRSA provide references and guidance on validated assessment tools, educational materials and navigation models. We also recognize that smaller or resource-limited practices may struggle to hire dedicated navigators. Alternatively, they can refer patients to external organizations, such as the American Cancer Society or local CBOs, which offer navigation services.

We recommend broadening the scope of navigation services to include financial guidance, especially given that inappropriate or excessive out-of-pocket costs and denial of payment for covered preventive services may lead to individuals foregoing important and timely screening and follow-up tests.

Guidance should also emphasize the value of navigators with shared lived experiences and practicing with cultural humility. Cultural concordance between navigators and patients, as well as the availability of culturally appropriate materials, can play a critical role in ensuring that patients feel comfortable and supported throughout their care. Specifying both "language interpretation and translation" services is crucial, as both spoken and written communication must be accessible to all patients.

We also strongly encourage the WPSI coalition align its current guidance on cervical cancer screening with breast cancer screening. This would entail including coverage for additional procedures, such as colposcopy with biopsy, for individuals with abnormal initial cervical cancer screening tests (cytologic or HPV testing) to ensure completion of the screening and diagnostic process in all eligible individuals.

Sincerely,

Jessica Altman
Executive Director
Covered California

Marcie Frost
Chief Executive Officer
CalPERS