The Breast Cervical Cancer Treatment Program (BCCTP)  
Transitioning Clients to BCCTP Insurance Coverage (Medicaid)

Questions: Amy Duarte 206-263-8309 or Heather Fluegel 206-263-8176

For a client with diagnosis of breast or cervical cancer:
1. Call Amy or Heather to provide client’s information and review eligibility
2. Fax the pathology results

Eligibility
Age, diagnosis, income, insurance status and relation to a contracted provider providing screening and/or diagnosis determine eligibility. **Coverage varies by immigration status.**
- **Permanent Residents here less than 5 years and noncitizens** are eligible for treatment of cancerous conditions only. These clients are **not eligible for treatment of pre-cancerous conditions.** If you have questions call either Amy or Heather.
- Noncitizens with a **visitor’s visa** are **not eligible** for this program.

Meet with the client to prequalify:
1. Verify that US citizen or Permanent Resident >5 years has been denied within a 1 year period for Washington Apple Health. If > 1 year, then must reapply.
2. Verify that the client has **no other medical insurance.** If a client has limited insurance coverage (catastrophic), the client may be eligible for BCCTP. Call Amy or Heather.
3. Determine if the client has **applied for other medical or Medicaid programs.**

Forms to Complete and Send
1. BCCTP Eligibility, Release & Consent Form (DOH 345-214 Feb 2018)  
   Required for all clients. Available in various languages. Check the website for language options.
2. BCCHP Program Consent (DOH 342-015 Jan 2018)  
   Required for all clients not enrolled in BCCHP.
3. BCCHP Text Message Opt-In & Consent Form.  
   Optional.
4. Breast Cancer Treatment Program Tracking Form (DOH 140-174 Jan 2018) or Cervical Cancer Treatment Program Tracking Form (DOH 140-174 Jan 2018)  
   Required for lawful permanent residents in US ≤ 5 years and noncitizens.

<table>
<thead>
<tr>
<th>Citizenship or Immigration Status</th>
<th>Forms needed</th>
<th>Identity/Residency Documentation</th>
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<tbody>
<tr>
<td>US Citizens</td>
<td>#1 #2 &amp; #3</td>
<td>Proof of Identity Document</td>
</tr>
<tr>
<td>US Citizens born in another country</td>
<td>#1 #2 &amp; #3</td>
<td>US Citizen Document</td>
</tr>
<tr>
<td>Lawful Permanent Resident, in US &gt; 5 years</td>
<td>#1 #2 &amp; #3</td>
<td>Permanent Residence Card showing date of entry</td>
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<tr>
<td>Lawful Permanent Resident, in US &lt; 5 years</td>
<td>#1 #2 #3 &amp; #4</td>
<td>Permanent Residence Card showing date of entry</td>
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<tr>
<td>Noncitizens</td>
<td>#1 #2 #3 &amp; #4</td>
<td>Proof of Identity Document</td>
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</table>
Proof of Identity and Residency Documentation

Provide a legible copy, i.e. lighten and enlarge small documents like driver’s license or permanent residence card before copying

Identity Documents
- State driver’s license
- State ID card
- Tribal document
- Military ID card

Proof of BOTH Identity & US Citizenship Documents
- US Passport/US Passport Card
- Certificate of Naturalization
- Certificate of US citizenship
- Tribal membership card with photo

US Citizenship Documents
- US Passport
- US Passport card
- Certificate of Naturalization
- Certificate of US citizenship
- Tribal membership card with photo
- Certified birth certificate
- Final US adoption decree
- US citizenship ID card
- Client has none of the above? Complete DSHS form 13-789

Immigration Documents
- Permanent Resident Card (Green Card)
  “resident since” date must be legible