

Request For Applications (RFA) — Answers to Frequently Asked Questions

National Breast and Cervical Early Detection Program (NBCCEDP) Prime Contractor for Eastern Washington

This document provides answers to common questions about the NBCCEDP Prime Contractor Eastern WA RFA, collected from recent contractor meetings and an informational session.

1. What is the typical number of clients served in Eastern Washington by the National Breast and Cervical Early Detection Program (NBCCEDP)?

The goal of the NBCCEDP is to increase access to life-saving breast and cervical cancer screening for all eligible people in Washington.

The number of clients served in Eastern Washington has changed over the years. This is mainly due to factors like the loss of Spokane Regional Health District as a prime contractor (2022), COVID-19 impacts (2020), and other changes in access to services.

Please review the table below for latest service numbers.

Eastern Washington Service Numbers

County	2016–17	2018–19	2020–21	2022–23	2024–25
Spokane	271	457	376	49	71
Asotin	6	14	8	0	0
Ferry	4	3	2	1	0
Wittman	7	9	5	0	0
Lincoln	7	4	6	0	1
Garfield	0	0	0	0	0
Pend Oreille	13	12	15	3	2
Stevens	11	29	22	3	2
All Eastern WA Counties	319	528	435	56	76

Interpretation notes for the above table:

- Spokane county identifies and enrolls more NBCCEDP clients than other counties in Eastern Washington because it has more clinical providers and infrastructure.
- The numbers in the table show service levels over time, not county-level need. These numbers should not be interpreted as a direct indication of need in a particular county.

2. Which partners provide services in the Eastern Washington region?

The list below includes names of known Department of Health partners in Eastern Washington partners, present and past. It is not an exhaustive list because practices and health systems evolve over time. **For contact information for these and other providers not listed below, please email Debbie.Spink@doh.wa.gov.**

Eastern Washington Providers List (alphabetized)

6 th Avenue Pharmacy	Kaiser	Holy Family Hospital	Loon Lake Community Health	Riverstone Family Health
Associated Family Physicians	Colville Community Health Center	Inchelium Clinic	Mt. Carmel Hospital	Rockwood Airway Heights Clinic
Assured Imaging	Colville Medical Group	Inland Imaging	NATIVE Health of Spokane	Sacred Heart Medical Center
NE Washington Medical Group	Country Home Nurse Practitioners	Jamison Family Medicine	Newport Community Hospital	Selkirk Community Health Center
Camas Center Clinic	Curlew Medical Clinics	Keller Clinic	North Central District Health Department	South Hill Family Medicine
CellNetix Lab	Davenport Clinic	Kettle Falls Clinic	Northport Community Health	Springdale Community Health
CellNetix Pathology	Deaconess Medical Center	Kettle River Community Clinic	Odessa Clinic	St. John Medical Center
CHAS Clinics	Deer Park Family Care Center	LabCorp of America	Palouse Imaging Consultants, PLLC	St. Joseph's Hospital

CHAS Community Health	Family Health Center	Latah Community Health	Phoenix Radiology	Sumit Cancer Center
Chewelah Community Health Center	Family Medicine Spokane	Lewis and Clark Health Center	Providence Family Medicine	Tri-State Memorial Hospital
Columbia Medical Associates	Hometown Family Medicine	Lincoln Hospital	Ritzville Medical Center	Valley Medical Center

3. Can a prime contractor also act as a referral clinic for services?

Yes. An organization can serve as both a prime contractor and a referral clinic. What matters most is the organization's ability to manage the program well and maintain strong connections with clinical providers.

4. Can an entity outside of the Eastern Washington region serve as a prime contractor?

Yes. Organizations outside the Eastern Washington service region are eligible to partner and serve as a prime contractor. The key requirement is having the knowledge, relationships, and capacity to support people living in Eastern Washington.

5. Can more than a single organization serve as a prime contractor?

Yes. Washington has traditionally contracted with a single organization per region, but the Washington State Department of Health is open to a coordinated approach with multiple entities.

A multi-entity model should include:

- Coverage for the entire Eastern Washington region
- Clear coordination for data management
- Partnerships that bring complementary strengths, such as:
 - Strong clinical provider connections
 - Evidence-based interventions for increasing screening rates and follow-up care:
 - Patient reminders
 - Patient Navigation
 - Provider Reminders
 - Removing barriers to care through a health-related social needs response

6. Can entities share a single data manager position?

Yes. Multiple organizations may share a single data manager. This may require a formal data-sharing agreement between the participating organizations. We encourage you to find out possible ways to best support your vision of serving the people in Eastern Washington

7. If we coordinate NBCCEDP administration with another regional partner, does that mean we share funding?

Yes. The total RFA amount covers an 18-month contract:

- \$120,000 for first 6 months
- \$240,000 for the following 12 months

If entities choose to co-administer the program, the funding proposal should include how organizations will divide the funds. The plan should support strong fiscal stewardship and prioritize clinical services. Administrative costs should not exceed 40:60 ratio compared to clinical funds.

8. Is there a possibility that more funding will become available after work begins?

We hope that additional funding becomes available, but it is not guaranteed. NBCCEDP funding comes from the Centers for Disease Control (CDC) and depends on federal allocations based on the CDC's criteria of funding need and availability.

Our team is committed to transparency and timely communication when information is available.

9. What type of support will there be for the Eastern Washington prime contractor(s)?

Prime contractors will receive onboarding, training, and ongoing technical assistance from several partners:

- **Washington State Department of Health** – Onboarding, training, and regular technical assistance.
- **CDC's National Breast and Cervical Cancer Early Detection Program** – Supports DOH's Breast, Cervical and Colon Health Program team by providing requested technical assistance, as requested.
- **University of Washington (contracted partner)** – Integrating evidence-based interventions into clinical workflow and supporting data collection for key performance indicators.
- **Yakima Health District** – Onboarding and mentoring support for regional partnerships in Eastern Washington, local health systems, and continuous quality improvement to help increase access to services.

DOH November 2025

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