|  |
| --- |
| **Program Year 2017–2018 Service Delivery Projections** |
| **Applicant:**  |
| **NBCCEDP-funded Services** | **Estimate:** |
| Proposed Number of Women to be **Served** in Program Year **2017–2018:***Women who will receive at least one NBCCEDP-funded clinical service: Mammogram, Clinical Breast Exam, Pap test, HPV test, or Diagnostic service.* Count each woman only once. |  |
| Proposed Number of Women to be **Served for Breast Cancer** in Program Year **2017–2018:***Women served who will receive at least one: mammogram or breast diagnostic service*. Count each woman only once. |  |
| Proposed Number of Women to be **Served for Cervical Cancer** in Program Year **2017–2018:***Women served who will receive at least one: Pap test, HPV test or cervical diagnostic service*. Count each woman only once. |  |
| **NBCCEDP-funded Patient Navigation** |
| Proposed number of women to be **Navigated** for Breast and Cervical screening in Program Year **2017–2018:***Additional unique women who will ONLY receive patient navigation support into and through the screening process AND are not included in the NBCCEDP-funded screening estimates above. These are women whose screening is reimbursed through other sources (e.g., state funds, private insurance, Medicaid, Medicare, etc.) while receiving NBCCEDP-funded navigation services.* |  |

**Instructions:** All cells in the Estimate column (highlighted in yellow) are to be completed by the applicant. Projections should be consistent with the work plan and will be used to monitor grantee performance. These estimates should reflect clinical services provided to eligible women using DP17-1701 funds.