

## HEDIS Provider Guide: Cervical Cancer Screening (CCS-E)

### Measure Description

Members 21 to 64 years of age who were recommended for routine cervical cancer screening who were screened for cervical cancer using any of the following criteria:

- Members 21 to 64 years of age who were recommended for routine cervical cancer screening and had cervical cytology performed within the last three (3) years;
- Members 30 to 64 years of age who were recommended for routine cervical cancer screening and had cervical high-risk human papillomavirus (hrHPV) testing performed within the last five (5) years; or
- Members 30 to 64 years of age who were recommended for routine cervical cancer screening and had cervical cytology/high-risk human papillomavirus (hrHPV) co-testing within the last five (5) years.

Members recommended for Cervical Cancer Screening

- Administrative Gender of Female at any time in the member’s history
- Sex Assigned at Birth of Female at any time in the member’s history
  - Sex Assigned at Birth LOINC code 76689-9 with Female LOINC Code LA3-6; SNOMED code 248152002
- Sex Parameter for Clinical Use of Female during the measurement period

#### Note

**It is recommended that transgender and gender diverse patients who have a cervix have regular cervical pap tests, as per the published guidelines for cisgender women.**

#### Exclusions

- Hysterectomy with no residual cervix or cervical agenesis or acquired absence of cervix any time during the member’s history through the last day of the measurement period
- Members in hospice or palliative care
- Members with Sex Assigned at Birth of Male (Sex Assigned at Birth LOINC code 76689-9 with Male LOINC Code LA2-8; SNOMED code 248153007) at any time in the patient’s history

### Using Correct Billing Codes to Identify Cervical Cancer Screening

Description	Codes
Cervical Cancer Screening	CPT: 88141-88143, 88147, 88148, 88150, 88152, 88153, 88164-88167, 88174, 88175
	HCPCS: G0123, G0124, G0141, G0143-G0145, G0147, G0148, P3000, P3001
	LOINC: 104866-9, 10524-7, 18500-9, 19762-4, 19765-7, 19766-5, 19774-9, 33717-0, 47527-7, 47528-5

Using Correct Billing Codes to Identify HPV Screening	
Description	Codes
High Risk HPV Lab Test	CPT: 0502U, 87624, 87625, 87626
	HCPCS: G0476
	LOINC: 104132-6, 104170-6, 104752-1, 104766-1, 104783-6, 106508-5, 106509-3, 21440-3, 30167-1, 38372-9, 59263-4, 59264-2, 59420-0, 69002-4, 71431-1, 75694-0, 77379-6, 77399-4, 77400-0, 82354-2, 82456-5, 82675-0, 95539-3
	SNOMED: 718591004

Exclusions Codes	
Description	Codes
Absence of Cervix Diagnosis	ICD10CM: Q51.5, Z90.710, Z90.712
Hysterectomy with no Residual Cervix	CPT: 57530, 57531, 57540, 57545, 57550, 57555, 57556, 58150, 58152, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290-58294, 58548, 58550, 58552-58554, 58570-58573, 58575, 58951, 58953, 58954, 58956, 59135
	ICD10PCS: OUTC0ZZ, OUTC4ZZ, OUTC7ZZ, OUTC8ZZ

### How to Improve HEDIS® Scores

- Request from your Blue Shield Promise Quality Program Manager a list of members who need a pap test.
- Use a reminder/recall system.
- Request pap test results to be sent to you if it is performed during an OB/GYN visit.
- Document in the medical record if the patient has had a hysterectomy with no residual cervix.
- HPV primary self-collection testing is now available in a health care setting and will count for cervical cancer screening. Check with your laboratory to ensure it can offer this new test. Self-collection can help increase access to cervical cancer screening and screening rates. It can also help with some patient barriers such as limited mobility, history of sexual trauma, gender dysphoria, religious and cultural beliefs, and discomfort or anxiety.
- Do not miss opportunities. For example, complete pap tests during regularly scheduled well woman visits, sick visits, urine pregnancy tests, UTI treatments, and Chlamydia/STI screenings.
- Submit medical records to your Blue Shield Quality Program Manager or through Cozeva® for cervical cancer screening or HPV testing completed per the time frame specified above or for any exclusions (e.g., total hysterectomy) if not captured through a claim or encounter.

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