

HEDIS® measures

Cervical Cancer Screening (CCS)(CCS-E)



This HEDIS® measure represents the percentage of women ages 21-64 who were screened for cervical cancer using one of the following criteria:

- **Women ages 21-64** who had cervical cytology performed within the last three years
- **Women ages 30-64** who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last five years
- **Women ages 30-64** who had cervical cytology/high-risk human papillomavirus (hrHPV) co-testing performed every five years.

Numerator codes for CCS

There is a large list of approved NCQA codes used to identify services included in the CCS measure. Below are a few of the approved codes. For a complete list, see NCQA.org.

Cervical cytology

CPT	88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88154, 88164, 88165, 88166, 88167, 88174, 88175
HCPCS	G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091

HPV tests high-risk HPV

CPT	87620, 87621, 87622, 87624, 87625
LOINC	G0476

Absence of cervix

ICD-10	Q51.5, Z90.710, Z90.712
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Documenting CCS

Documentation in the medical record must include both of the following:

- A note indicating the date when the cervical cytology was performed
- Lab result or findings

Note: Do not count biopsies because they are diagnostic and therapeutic only and are not for primary cervical cancer screening.

Evidence of hrHPV testing within the last 5 years also captures patients who had co-testing.

Strategies for improvement

- ✓ Use NCQA coding tips to actively reflect care rendered.
- ✓ Educate the member about the purpose and procedure of the screening
- ✓ Call members or send letters to alert them of the need for screening — especially for those who don't often come in for care.
- ✓ Provide easy-to-read instructions and education tools about cancer screening procedures and follow-up.
- ✓ Record all preventive care with results in medical records to ensure compliance with guidelines.
- ✓ Perform quality assurance checks to ensure that data is captured and entered appropriately.

The CCS measure is hybrid. Any care missed via claims during the measurement year will result in medical record requests in the HEDIS® Medical Record Review Project.

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