

HEDIS® Tip Sheet

Cervical Cancer Screening (CCS-E)

Note: Effective 2025, the CCS measure will be retired and only the CCS-E will be reported.

Measure Description

The percentage of members 21-64 years of age who were recommended for routine cervical cancer screening and were screened for cervical cancer using any of the following criteria:

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

Product Lines: Commercial, Medicaid, Exchange

Codes Included in the Current HEDIS® Measure

Codes to Identify Cervical Cancer Screenings

Description	Code
Cervical Cytology Lab Test	CPT: 88141-88143, 88147, 88148, 88150, 88152, 88153, 88164-88167, 88174, 88175 HCPCS: G0123, G0124, G0141, G0143-G0145, G0147-G0148, P3000, P3001, Q0091
High Risk HPV Test	CPT: 87624, 87625 HCPCS: G0476

Codes to Identify Exclusions

Description	Code
Absence of Cervix or 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 ICD-10: Q51.5, Z90.710, Z90.712, OUTC0ZZ, OUTC4ZZ, OUTC7ZZ, OUTC8ZZ
Hospice Encounter or Intervention	CPT: 99377, 99378 HCPCS: G0182, G9473-G9479, Q5003-Q5008, Q5010, S9126, T2042-T2046 UBREV: 0115, 0125, 0135, 0145, 0155, 0235, 0650-0652, 0655-0659
Palliative Care Encounter	HCPCS: G9054

Ways Providers can Improve HEDIS® Performance

- Request to have results of Pap tests sent to you if done at an OB/GYN visit.
- Document in the medical record if the member has had a total hysterectomy with no residual cervix and fax Molina the chart (please see codes above).
- Avoid missed opportunities (e.g., completing PAP tests during regularly scheduled well woman visits, sick visits, urine pregnancy tests, UTI and chlamydia/STI screenings).
- Ensure communications respect language preferences and are culturally appropriate.
- Implement standing orders for cervical cancer screening.

Ways Health Plans can Improve HEDIS® Performance

- Ensure member communications respect language preferences and are culturally appropriate.
- Deploy community-based patient navigators to connect women to screening opportunities.
- Audit, identify, and educate top 10 providers with members on the needed services list – include information about exclusion criteria.
- Address financial barriers by informing members that cervical cancer screening is a covered preventive service.
- Schedule member appointments for cervical cancer screening and send reminders prior to appointment.

Required Exclusions

- Members who use hospice or using hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who die any time during the measurement year.
- Hysterectomy with no residual cervix any time during the member's history through December 31 of the measurement year.
- Cervical agenesis or acquired absence of cervix any time during the member's history through December 31 of the measurement year. Do not include laboratory claims (POS: 81).
- Members receiving palliative care at any time during the measurement year.
- Members who had an encounter for palliative care (ICD-10-CM: Z51.5) any time during the measurement year. Do not include laboratory claims (POS: 81).
- Members with Sex Assigned at Birth (LOINC: 76689-9) of Male (LOINC: LA2-8) at any time in the member's history.

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