

Cervical Cancer Screening (CCS, CCS-E)

By collaborating, we can improve health outcomes for your patients, our members. This MDwise tip sheet provides best practices and tips that can optimize HEDIS scores and identify opportunities to improve patient care.

What Is the Measure?

The percentage of members, assigned female at birth, 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 three (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 five (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) testing within the last five (5) years.

IHCP-Covered Codes to Identify (CCS, CCS-E):

Description	Codes
Cervical Cancer Screening	CPT: 88141-88143, 88147, 88148, 88150, 88152, 88153, 88164-88167, 88174, 88175 HCPCS: G0123, G0124, G0141, G0143, G0147, G0148, Q0091
Codes to Identify HPV Test	CPT: 87624, 87625

Earn incentive dollars when your members meet this measure!

For example, a panel of 750 members = \$375/month

[Physician Pay for Value \(mdwise.org\)](https://www.mdwise.org/physician-pay-for-value)

How to Improve Your Quality Score:

- **Display culturally appropriate posters** and brochures in patient areas to encourage patients to talk to providers about cervical cancer screening.
- **Educate patients** that cervical cancer screening is a covered preventive service.
- **Help members schedule** their routine cervical cancer screening.
- **Use needed services lists** to identify women who need a Pap test.
- **Avoid missed opportunities.** If time allows, complete Pap tests during regularly scheduled well-woman visits, sick visits, urine pregnancy tests, UTI and chlamydia/STI screenings.
- **Request that Pap screening results be** sent to you if completed at OB-GYN visits.
- **Document in the medical record** if a patient had a hysterectomy, including the year completed. Remember synonyms (total, complete, radical) must be included in the documentation for the member to be excluded.
- **Assess the patient's risk**, which may include sexual history, contraceptive practices, and family history of cancer.
- **Implement standing orders** for cervical cancer screening.
- **Review and document** your patient's surgical and preventive screening history with results.

