

Colorectal Cancer Screening (COL-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?

This measure assesses the percentage of members 45-75 years of age who had appropriate screening for colorectal cancer using any of the following tests:

Type of Screening	Compliant for:
Colonoscopy	10 years
Flexible Sigmoidoscopy	5 years
sDNA (stool DNA + FIT test), also known as Cologuard®	3 years
FIT (Fecal Immunochemical Test) FOBT (Fecal Occult Blood Test)	1 year
CT-Colonography (virtual colonoscopy)	5 years

Early treatment can lead to a 90% survival rate after five years.

IHCP-Covered Codes to Identify COL-E:

Description	Codes
FOTB	CPT: 82270, 82274
Flexible Sigmoidoscopy	CPT: 45330-45335, 45337, 45338, 45340-45342, 45346, 45347, 45349, 45350
Colonoscopy	CPT: 44388-44392, 44394, 44401-44408, 45378-45382, 45384-45386, 45388-45393, 45398
sDNA FIT	CPT: 81528
CT Colonography	CPT: 74263

Summary of 2024 Changes:

COL is a retired measure and has been replaced with COL-E.



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:

- **Educate patients** on the importance of colorectal cancer screening. For patients who refuse a colonoscopy, discuss noninvasive screening options such as Cologuard® or FIT.
- **Assess existing barriers** to colorectal cancer screening (i.e., access, fear/anxiety, etc).
- **Use standing orders** and empower office staff to distribute FOBT kits to patients who need colorectal cancer screening or prepare referrals for colonoscopy.
- **Implement a FLU-FOBT program** to increase access to colorectal cancer screening by offering home tests to patients at the time of their flu shots.
- **Have FIT kits readily available** to give patients during the visit.
- **Fecal Immunochemical Test (FIT) and Cologuard® (sDNA + FIT) tests** are NOT the same screening. FIT uses antibodies to detect blood in the stool (completed annually), and sDNA combines the FIT with a test that detects altered DNA in the stool (completed every three (3) years).
- **Colonoscopy must be complete**, or evidence must show that the scope advanced beyond splenic flexure to be considered compliant within the time frame. An incomplete colonoscopy or evidence that the scope advanced into the sigmoid colon can be considered compliant as a flexible sigmoidoscopy.