

2020 MCAS MEASURE: CERVICAL CANCER SCREENING (CCS)

Measure Steward: National Committee for Quality Assurance (NCQA)

Gold Coast Health Plan's (GCHP) goal is to help its providers gain compliance with their annual Managed Care Accountability Set (MCAS) scores by providing guidance and resources. This tip sheet will provide the key components to the MCAS measure, "*Cervical Cancer Screening (CCS)*."

Measure Description: Measures women ages 21 to 64 during the measurement year who were screened for cervical cancer using either of the following criteria:

- Women ages 21 to 64 who had cervical cytology screening within the last 3 years.
- Women ages 30 to 64 who had a cervical high-risk human papillomavirus (hrHPV) test within the last 5 years.
- Women ages 30 to 64 who had a cervical cytology / high-risk human papillomavirus (hrHPV) co-testing within the last 5 years.

The medical record must include:

- The date of the cervical cytology and/or the date the hrHPV test was performed.
 - AND
- The result or finding.

Data Collection Method: Hybrid¹

Codes used to identify cervical cytology and human papillomavirus (HPV) screenings and results.

Description	СРТ	HCPCS	LOINC	SNOMED
Cervical Cytology Lab Test	88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88154, 88164, 88165, 88166, 88167, 88174, 88175	G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091	10524-7, 18500-9, 19762-4, 19764-0, 19765-7, 19766-5, 19774-9, 33717-0, 47527-7, 47528-5	171149006, 416107004, 417036008, 439958008, 440623000, 448651000124104
Cervical Cytology Results				168406009, 168407000, 168408005, 168410007, 168414003, 168415002, 168416001, 168424006, 250538001, 268543007, 269957009, 269958004, 269959007, 269960002, 269961003, 269963000, 275805003, 281101005, 309081009, 310841002, 310842009, 416030007, 416032004, 416033009, 439074000, 439776006, 439888000, 441087007, 441088002, 441094005, 441219009, 441667007, 700399008, 700400001, 62051000119105, 62061000119107, 98791000119102
HPV Test	87620, 87621, 87622, 87624, 87625	G0476	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	35904009, 448651000124104
HPV Results				391147004, 391148009, 441667007, 718591004, 720005005



Description	ICD-10-CM	ICD-10-PCS	ICD-9-CM*	ICD-9-PCS	СРТ	SNOMED
Absence of Cervix	Q51.5, Z90.710, Z90.712		618.5, 752.43, V88.01, V88.03			37687000, 248911005, 428078001, 429290001, 429763009, 723171001, 10738891000119107
Hysterectomy with No Residual Cervix		OUTCOZZ, OUTC4ZZ, OUTC7ZZ, OUTC8ZZ		68.41, 68.49, 68.51, 68.59, 68.61, 68.69, 68.71, 68.79, 68.8	51925, 56308, 57540, 57545, 57550, 57555, 57556, 58150, 58152, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290, 58291, 58292, 58293, 58294, 58548, 58550, 58552, 58553, 58554, 58570, 58571, 58572, 58573, 58575, 58951, 58953, 58954, 58956, 59135	24293001, 27950001, 31545000, 35955002, 41566006, 46226009, 59750000, 86477000, 88144003, 116140006, 116142003, 116143008, 116144002, 236888001, 236891001, 287924009, 307771009, 361222003, 361223008, 387626007, 414575003, 440383008, 446446002, 446679008, 447771005, 708877008, 708878003, 739671004, 739672006, 739673001, 739674007, 740514001, 740515000, 767610009, 767611008, 767612001

Codes used to identify women excluded from the CCS measure due to absence of cervix or hysterectomy with no residual cervix.

* ICD-9 codes used for the retrospective claim review prior to the October 1, 2016 implementation of ICD-10 codes.

Screenings That Do Not Meet the CCS Measure Specifications:

- Cervical cytology lab results that explicitly state the sample was inadequate or that "no cervical cells were present."
- Biopsies.
- Cervical cytology / HPV Reflex Testing. For example, if the medical record indicates the HPV test was performed only after determining the cytology result, this is considered reflex testing and does not meet criteria for cervical cytology / HPV co-testing.

Best Practices:

- Use the GCHP Performance Feedback Report to identify members with gaps in care.
- Make outreach calls and/or send letters to advise members of the need for a visit.
- > Designate a care team member to reach out to patients due for cervical cancer screening.
- Ensure screening is ordered when it is due, regardless of the reason for the visit.
- Empower your medical assistants and nurses with standing orders to screen and identify patients who are currently due or past due for their pap.
- Send targeted mailings, text messages or emails and follow-up telephone calls to chronically non-compliant patients.
- Display culturally-appropriate posters and brochures at an appropriate literacy level in patient areas to encourage patients to talk to providers about CCS.
- Cultural competency is not just limited to race, ethnicity and culture. Perceptions, values, beliefs and trust can also be influenced by factors such as religion, age, sexual orientation, gender identity and socioeconomic status.
- For patients who completed their cervical cancer screening at a different clinic, assess and document the date, location, and result of their last screening and have the physician sign the note. Also, have the patient sign a release of records.
- Create prompts in your EMR for screening that do not turn off until results are received, rather than when the test is ordered.
- Document the current care plan and routinely provide a copy to the patient.
- Ensure your documentation is clear and concise.
- Use proper coding.

¹Measures reported using the *hybrid* data collection method report on a sample of the eligible population (usually 411) and use both administrative and medical record data sources to evaluate if services were performed.