



## 2025 Measurement Year

### MCAS MEASURE: CHLAMYDIA SCREENING (CHL)

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 provides the key components to the MCAS measure, "*Chlamydia Screening (CHL)*."

**Measure Description:** *The percentage of members ages 16-24 who were recommended for routine chlamydia screening, were identified as sexually active and who had at least one test for chlamydia during the measurement year.*

**Data Collection Method:** Administrative<sup>1</sup>

#### Criteria to identify Eligible Population

- ▶ Evidence of sexual activity. [Click here](#) for a complete list of codes (ICD-10-CM, CPT, HCPCS, LOINC).  
**AND/OR**
- ▶ Evidence of contraceptive prescription dispensing.

#### Contraceptive Medications

Description	Prescription
Contraceptives	Desogestrel-ethinyl estradiol Dienogest-estradiol multiphasic Drospirenon-ethinyl estradiol Drospirenone-ethinyl estradiol-levomefolate biphasic Ethinyl estradiol-ethynodiol Ethinyl estradiol-etonogestrel Ethinyl estradiol-levonorgestrel Ethinyl estradiol-norelgestromin Ethinyl estradiol-norethindrone Ethinyl estradiol-norgestimate Ethinyl estradiol-norgestrel Etonogestrel Levonorgestrel Medroxyprogesterone Mestranol-norethinndrone Norethindrone
Diaphragm	Diaphragm
Spermicide	Nonxynol 9

#### CHL Clinical Code Sets

- ▶ For billing, reimbursement, and reporting of services completed, submit claims timely with the appropriate medical codes for all clinical conditions evaluated and services completed.



**Codes used to identify chlamydia screening in women.**

Description	CPT	LOINC
Chlamydia Test	87110, 87270, 87320, 87490, 87491, 87492, 87810	14463-4, 14464-2, 14465-9, 14467-5, 14474-1, 14513-6, 16600-9, 21190-4, 21191-2, 21613-5, 23838-6, 31775-0, 34710-4, 42931-6, 43304-5, 43404-3, 44806-8, 44807-6, 45068-4, 45069-2, 45072-6, 45073-4, 45075-9, 45084-1, 45089-0, 45090-8, 45091-6, 45093-2, 45095-7, 4993-2, 50387-0, 53925-4, 53926-2, 57287-5, 6353-7, 6356-0, 6357-8, 80360-1, 80361-9, 80362-7, 80363-5, 80364-3, 80365-0, 80367-6, 82306-2, 87949-4, 87950-2, 88221-7, 89648-0, 91860-7, 91873-0

**Exclusion Criteria – Members with any of the following conditions are excluded from the CHL measure:**

- ▶ Members who received hospice care during the measurement year.
- ▶ Members who had a pregnancy test during the measurement year and one of the following:
  - ▶ Received a prescription of isotretinoin on the date of the pregnancy or within the six days after the test.
  - ▶ Received a diagnostic radiology exam on the date of the pregnancy test or within the six days after the test.
- ▶ Members who die any time during the measurement year.
- ▶ Members who were assigned male at birth.

**Best Practices:**

- ▶ Use the Inovalon® Provider Enablement Quality Gaps Insights to identify members with gaps in care.
- ▶ Provide training to all medical staff to empower them to educate and encourage screening during interactions with appropriate population. Include training and implementation of appropriate Sexual History Screening tool with a focus on the younger population. Building trust throughout the process is a key element to ensure compliance.
- ▶ Collect a sample when patient voids prior to pelvic exam and have a discussion in a private setting regarding CHL screening. An additional strategy is to place a UA sample cup or CHL swab on the tray when setting up the exam room for all visits with a women's health provider. This can help prompt a discussion regarding CHL screening and increase the ease of sample collection.
- ▶ Include chlamydia screening as a part of routine clinical preventive care for all females 16-24 years of age.
- ▶ Include discussion of sexual history as part of preventive care for all patients starting at age 12.
- ▶ Use normalizing and opt-out language, such as, "I recommend a test for chlamydia to all my clients under the age of 25." AVOID questions like, "Do you want to be tested for chlamydia today?"
- ▶ Use the least invasive and highest quality recommended laboratory technologies available.
- ▶ 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.
- ▶ Ensure screening is ordered when it is due, regardless of the reason for the visit.
- ▶ For patients who completed a prior women's health visit at a different clinic, specifically request any prior CHL screenings. Upon receipt, 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.
- ▶ GCHP offers free health education services, materials, classes, and online resources to help members achieve a healthy lifestyle. Providers can contact the Health Education Department or refer patients / guardians / caregivers to the following information:
  - Providers, call: 1-805-437-5961
  - Members, call: 1-888-301-1228 / TTY 1-888-310-7347
  - GCHP Health Education Webpage (resources in English and Spanish): [Click Here](#)

<sup>1</sup> Measures reported using the *administrative* data collection method report on the entire eligible population and use only administrative data sources (e.g., claims, encounter, lab, immunization registries) to evaluate if services were performed.