

Coding Reference Guide Measurement Year 2024

Cervical Cancer Screening (CCS)



Measure Description

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

- *Members ages 21-64 who had cervical cytology (Pap) test performed during 2022-2024
- *Members ages 30-64 who had cervical high-risk human papillomavirus (hrHPV) testing during 2020-2024 (includes cervical cytology/hrHPV co-testing)

*Female sex assigned at birth

The following codes meet the criteria:

Cervical Cytology Lab Test	CPT: 88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88164, 88165, 88166, 88167, 88174, 88175
	HCPCS: G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091
	LOINC: 10524-7, 18500-9, 19762-4, 19764-0, 19765-7, 19766-5, 19774-9, 33717-0, 47527-7, 47528-5
	SNOMED: 171149006, 416107004, 417036008, 440623000, 448651000124104
Cervical Cytology Result/Finding (“Unknown” is not considered a result/finding.)	SNOMED: 168406009, 168407000, 168408005, 168410007, 168414003, 168415002, 168416001, 168424006, 250538001, 269957009, 269958004, 269959007, 269960002, 269961003, 269963000, 275805003, 281101005, 309081009, 310841002, 310842009, 416030007, 416032004, 416033009, 439074000, 439776006, 439888000, 441087007, 441088002, 441094005, 441219009, 441667007, 700399008, 700400001, 1155766001, 62051000119105, 62061000119107, 98791000119102
High Risk HPV Lab Test	CPT: 87624, 87625
	HCPCS: G0476

High Risk HPV Lab Test (cont.)	<p>LOINC: 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, 95539-3</p> <p>SNOMED: 35904009, 448651000124104</p>
The following codes will exclude the Member from the measure:	
Hysterectomy With No Residual Cervix Any Time Through December 31, 2024 (ex. complete, total, or simple hysterectomy, vaginal hysterectomy)	<p>CPT: 57530, 57531, 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</p> <p>ICD10PCS: 0UTC0ZZ, 0UTC4ZZ, 0UTC7ZZ, 0UTC8ZZ</p> <p>SNOMED: 24293001, 27950001, 31545000, 35955002, 41566006, 46226009, 59750000, 82418001, 86477000, 88144003, 116140006, 116142003, 116143008, 116144002, 176697007, 236888001, 236891001, 287924009, 307771009, 361222003, 361223008, 387626007, 414575003, 440383008, 446446002, 446679008, 708877008, 708878003, 739671004, 739672006, 739673001, 739674007, 740514001, 740515000, 767610009, 767611008, 767612001, 1163275000</p>
Absence of Cervix Any Time Through December 31, 2024	<p>ICD10CM: Q51.5, Z90.710, Z90.712</p> <p>SNOMED CT: 37687000, 248911005, 428078001, 429290001, 429763009, 473171009, 723171001, 10738891000119107</p>
Members with Male Sex Assigned at Birth	<p>LOINC: 76689-9 note-male sex assigned at birth LOINC code LA2-8</p>
The following will exclude the Member from the measure and must occur during 2024	
Hospice Encounter During 2024	<p>HCPCS: G9473, G9474, G9475, G9476, G9477, G9478, G9479, Q5003, Q5004, Q5005, Q5006, Q5007, Q5008, Q5010, S9126, T2042, T2043, T2044, T2045, T2046</p> <p>SNOMED: 183919006, 183920000, 183921001, 305336008, 305911006, 385765002</p> <p>UBREV: 0115, 0125, 0135, 0145, 0155, 0235, 0650, 0651, 0652, 0655, 0656, 0657, 0658, 0659</p> <p>CPT: 99377, 99378</p>

Hospice Intervention During 2024	HCPCS: G0182
	SNOMED: 170935008, 170936009, 385763009
Palliative Care Assessment During 2024	SNOMED: 718890006, 718893008, 718895001, 718898004, 718899007, 718901003, 718903000, 718904006, 718957007, 718967002, 718969004, 718971004, 718973001, 718974007, 718975008, 718976009, 761865002, 761866001, 761867005, 457511000124100
Palliative Care Encounter During 2024	HCPCS: G9054, M1017
	ICD10CM: Z51.5 note-do not include laboratory claims (claims with POS code 81)
	SNOMED: 305284002, 305381007, 305686008, 305824005, 441874000, 713281006, 4901000124101
Palliative Care Intervention During 2024	SNOMED: 103735009, 105402000, 395669003, 395670002, 395694002, 395695001, 443761007, 1841000124106, 433181000124107
Patients who died any time during 2024	

Tips and Best Practices to Help Improve Performance

- Utilize the monthly Gaps in Care (GIC) report for a list of MVP members and screenings still required
- Document preventive care along with medical and surgical history in the medical record; include names of the screenings, dates, and *results*. An office note with this information is sufficient to close a CCS gap if within the measure timeframe.
- Cervical biopsies cannot be counted as primary cervical cancer screening
- Lab reports that state the sample was inadequate cannot be accepted
 - Lab reports that state “no endocervical cells present” are acceptable if a valid result was reported for the test
- Consider using alerts or flags within electronic health record (EHR) to remind Members when screening tests are due

Tips for Excluding Members From the CCS Measure

- When documenting surgical history, avoid using “hysterectomy” alone as it is not sufficient evidence the cervix was removed—*specify the type of procedure*, such as:
 - Total hysterectomy, total abdominal hysterectomy (TAH), total vaginal hysterectomy (TVH), laparoscopic assisted vaginal hysterectomy (LAVH), simple hysterectomy, etc.
- A Report of Operation for the hysterectomy procedure may be submitted as exclusionary evidence.
- If the name of the hysterectomy procedure is unknown, an office note documenting a GU exam showing surgical absence of cervix meets exclusion criteria.
- Notation of “Hysterectomy” combined with documentation that the patient no longer needs cervical cancer screening **NO LONGER** meets exclusion criteria
- Notation of “Hysterectomy” combined with documentation of vaginal Pap on the pathology report **NO LONGER** meets exclusion criteria
- Reminder about exclusions from CCS:
 - Your patient may have had a hysterectomy prior to their enrollment with MVP. The patient will remain listed on your Gaps in Care report until documentation is submitted to MVP to exclude the member. Please see your monthly GIC report for instructions.