## Coding Reference Guide Measurement Year 2023 Cervical Cancer Screening (CCS)



## **Measure Description**

Women 21-64 years of age who were screened for cervical cancer using any of the following criteria:

- Women ages 21-64 who had cervical cytology (Pap) test performed during 2021-2023
- Women ages 30-64 who had cervical high-risk human papillomavirus (hrHPV) testing during 2019-2023 (including cervical cytology/hrHPV co-testing)

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	SNOMED:	
	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, 1155766001, 62051000119105, 62061000119107, 98791000119102	
High Risk HPV Lab Test	CPT:	
	87624, 87625	
	HCPCS:	
	G0476	

	LOINC:
High Risk HPV Lab Test (cont.)	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
	SNOMED:
	35904009, 448651000124104
High Risk HPV Test	SNOMED:
Result/Finding	718591004
The following codes will exclude	the Member from the measure:
	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,
Hysterectomy With No	58553, 58554, 58570, 58571, 58572, 58573, 58575, 58951, 58953, 58954, 58956, 59135
Residual Cervix Any Time	ICD10PCS:
Through December 31, 2023	0UTC0ZZ, 0UTC4ZZ, 0UTC7ZZ, 0UTC8ZZ
(ex. complete, total, or simple	SNOMED:
hysterectomy, vaginal	24293001, 27950001, 31545000, 35955002, 41566006, 46226009, 59750000, 82418001, 86477000,
hysterectomy)	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
Absence of Cervix Any Time Through December 31, 2023	ICD10CM:
	Q51.5, Z90.710, Z90.712
	SNOMED CT:
	37687000, 248911005, 428078001, 429290001, 429763009, 473171009, 723171001, 10738891000119107
The following will exclude the M	ember from the measure and must occur during 2023:
	HCPCS:
	G9473, G9474, G9475, G9476, G9477, G9478, G9479, Q5003, Q5004, Q5005, Q5006, Q5007, Q5008, Q5010,
Hospice Encounter During 2023	S9126, T2042, T2043, T2044, T2045, T2046
	SNOMED:
	183919006, 183920000, 183921001, 305336008, 305911006, 385765002
	UBREV:
	0115, 0125, 0135, 0145, 0155, 0235, 0650, 0651, 0652, 0655, 0656, 0657, 0658, 0659

	CPT:
	99377, 99378
Hospice Intervention	HCPCS:
During 2023	G0182
	SNOMED:
	170935008, 170936009, 385763009
	SNOMED:
Palliative Care Assessment During 2023	718890006, 718893008, 718895001, 718898004, 718899007, 718901003, 718903000, 718904006,
	718957007, 718967002, 718969004, 718971004, 718973001, 718974007, 718975008, 718976009,
	761865002, 761866001, 761867005, 457511000124100
Palliative Care Encounter During 2023	HCPCS:
	G9054, M1017
	ICD10CM:
	Z51.5
	SNOMED:
	305284002, 305381007, 305686008, 305824005, 441874000, 713281006, 4901000124101
Palliative Care Intervention During 2023	SNOMED:
	103735009, 105402000, 395669003, 395670002, 395694002, 395695001, 443761007, 1841000124106,
	433181000124107
Patients who died any time dur	ing 2023

## **Tips and Best Practices to Help Improve Performance**

- Utilize the monthly Gaps in Care (GIC) report for a list of MVP members and the screenings that they still need
- Document preventive care, medical, and surgical history in the medical record and include the name of the screening, date, and the result
- 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 cervical 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 CCS**

- When documenting medical/surgical history, avoid using "hysterectomy" alone as it is not sufficient evidence that the cervix was removed—specify the type of procedure such as:
  - Total hysterectomy, total abdominal hysterectomy (TAH), total vaginal hysterectomy, laparoscopic assisted vaginal hysterectomy (LAVH), simple hysterectomy
- Notation of "Hysterectomy" combined with documentation that the patient no longer needs cervical cancer screening meets exclusion criteria
- Notation of "Hysterectomy" combined with documentation of vaginal Pap on the pathology report 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 in your Gap in Care report until documentation is submitted to MVP to exclude the member. Please see your monthly GIC report for instructions.