Cervical Cancer Screening (CCS-E)

New for 2025

Updated

- The measure is referred to only as CCS-E and will be an electronic-only measure

Yes!
Supplemental data accepted

Definition

Percentage of members ages 21-64 who were recommended for routine cervical cancer screening and were screened for cervical cancer using any of the following criteria:

- Members recommended for routine cervical cancer screening ages 21–64 who had Cervical cytology performed in the measurement year or 2 years prior
- Members recommended for routine cervical cancer screening ages 30–64 who had Cervical cytology/high-risk human papillomavirus (hrHPV) co-testing performed in the measurement year or four years prior. The member must have been at least age 30 on the date of the test.
- Members recommended for routine cervical cancer screening ages 30–64 who had cervical high-risk human papillomavirus (hrHPV) testing performed in the measurement year or four years prior

Plans(s) affected	Quality program(s) affected	Collection and reporting method
• Commercial • Exchange/Marketplace • Medicaid	• CMS Quality Rating System • NCQA Accreditation • NCQA Health Plan Ratings	• Electronic data only

Cervical Cancer Screening (CCS-E) (cont.)

Codes

Cervical cytology	
CPT®/CPT II	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	1155766001, 168406009, 168407000, 168408005, 168410007, 168414003, 168415002, 168416001, 168424006, 171149006, 250538001, 269957009, 269958004, 269959007, 269960002, 269961003, 269963000, 275805003, 281101005, 309081009, 310841002, 310842009, 416030007, 416032004, 416033009, 416107004, 417036008, 439074000, 439776006, 439888000, 440623000, 441087007, 441088002, 441094005, 441219009, 441667007, 448651000124104, 62051000119105, 62061000119107, 700399008, 700400001, 98791000119102
High-risk HPV test	
CPT®/CPT II	87624, 87625
HCPCS	G0476
LOINC	104132-6, 77379-6, 82354-2, 77399-4, 59263-4, 82456-5, 82675-0, 59420-0, 30167-1, 21440-3, 77400-0, 59264-2, 75694-0, 95539-3, 71431-1, 104170-6, 38372-9, 69002-4
SNOMED	35904009, 448651000124104, 718591004

Cervical Cancer Screening (CCS-E)(cont.)

Required exclusion(s)

Exclusion	Time frame
• Members in hospice or using hospice services • Members receiving palliative care • Members who died	Any time during the measurement year
Members with sex assigned at birth (LOINC code 76689-9) of male (LOINC code LA2-8)	Any time in a member's history through Dec. 31 of the measurement year
Hysterectomy with no residual cervix, cervical agenesis or acquired absence of cervix. Exclusion codes listed below.	Any time in a member's history through Dec. 31 of the measurement year

ICD-10-CM/ ICD10PCS	Q51.5, Z90.710, Z90.712, 0UTC0ZZ, 0UTC4ZZ, 0UTC7ZZ, 0UTC8ZZ
CPT®/CPT II	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
SNOMED	10738891000119107, 116140006, 116142003, 116143008, 116144002, 1163275000, 1287897002, 176697007, 236888001, 236891001, 24293001, 248911005, 27950001, 287924009, 307771009, 31545000, 35955002, 361222003, 361223008, 37687000, 387626007, 414575003, 41566006, 428078001, 429290001, 429763009, 440383008, 446446002, 446679008, 46226009, 473171009, 59750000, 608805000, 608806004, 608807008, 708877008, 708878003, 723171001, 739671004, 739672006, 739673001, 739674007, 740514001, 740515000, 767610009, 767611008, 767612001, 82418001, 86477000, 88144003

Cervical Cancer Screening (CCS-E)(cont.)

Important notes

	Test, service or procedure to close care opportunity	Medical record detail including, but not limited to
Measurement year or 2 years prior	• Cervical cytology for members ages 21-64 • High-risk HPV test (hrHPV) with results or findings for members ages 30-64	• Consultation reports • Diagnostic reports • Health history and physical • Lab reports
Measurement year or 4 years prior – test must be performed when the member is age 30 or older		

Tips and best practices to help close this care opportunity

- **Please check your Patient Care Opportunity Report (PCOR) or Practice Assist often to see members with open care opportunities.** If you have questions, your UnitedHealthcare representative can help.
- Evidence of hrHPV testing within the last 5 years also captures patients who had cotesting
  - Documentation of “HPV Test” can be counted as evidence of hrHPV Test, as long as the result is documented
- As an administrative measure, it's important to submit the appropriate ICD-10 diagnosis code that reflects a member's history of "Hysterectomy with no residual cervix, cervical agenesis or acquired absence of cervix"
  - If a member is new to the care provider and the diagnosis is discovered during the history and physical, the code should be submitted with the initial visit claim
  - If a member isn't new to the care provider but the member's chart has a documented history of the diagnosis, the ICD-10 diagnosis code should be submitted on any visit claim
- Documentation of a “hysterectomy” alone will **not** meet the intent of the exclusion
  - The documentation must include the words “total,” “complete” or “radical” abdominal or vaginal hysterectomy
  - Documentation of a “vaginal Pap smear” with documentation of “hysterectomy”
  - Documentation of hysterectomy and documentation that a member no longer needs Pap testing/cervical cancer screening
- Member reported information documented in the patient’s medical record is acceptable as long as there is a date and result of the test or a date of the hysterectomy and acceptable documentation of no residual cervix. The member reported information must be logged in the patient’s chart by a care provider.

Cervical Cancer Screening (CCS-E)(cont.)

- Biopsies are diagnostic and therapeutic, and not valid for primary cervical cancer screening.
- Lab results for cervical cancer screening or procedure codes for hysterectomy can be accepted as supplemental data. Please contact your UnitedHealthcare representative to discuss clinical data exchange opportunities.
- Sharing member demographic data is critical to understanding the cultural, linguistic and social needs of those we serve and decreasing health inequities across the care continuum. This data can include, but is not limited to, race, ethnicity, language, sexual orientation, gender identity, pronouns, sex assigned at birth and disability status.
- Assess and address member barriers to regular cervical cancer screening (e.g., access to care, transportation, cost, fear/anxiety)
- Educate members on the importance of early detection and encourage routine screening
- Create care gap alerts in your electronic medical record and proactively outreach to members who are not scheduled (scheduling calls, emails, time for screening postcards, etc.)
  - As part of the UnitedHealthcare clinical structured data exchange program, we encourage you to include this demographic data with any structured data file or CCD. Your information is confidential. UnitedHealthcare will keep personally identifiable information confidential and won't disclose any information without your written consent.