

CERVICAL CANCER SCREENINGS (CCS)

PROVIDER TIP SHEET



What is Being Measured?

The percentage of women 21–64 years of age who have received cervical cancer screening.



Why is This Measure Important?

In the United States, women aged 21–64 years who receive regular cervical cancer screenings are less likely to get cervical cancer and less likely to die from it.¹

Cervical Cancer Screening can detect cervical changes early. It usually takes three to seven years for high-grade changes in cervical cells to become cancer. Cervical cancer screening may detect these changes before they become cancerous.²



Eligible Population

Women 21-64 years of age who received cervical cancer screening using any of the following criteria:

- Women 21-64 years of age who had cervical cytology performed during the measurement year or the two years prior to the measurement year.
- Women 30-64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed during the measurement year or the four years prior to the measurement year.
- Women 30-64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) co-testing performed during the measurement year or the four years prior to the measurement year.

Documentation should include:

- Lab reports.
- Past GYN/Medical/Surgical history.
- Visit notes, stand-alone problem lists, consult reports.


Documentation

- Members with history of a hysterectomy with no residual cervix, cervical agenesis, or acquired absence of cervix may be excluded. Evidence of these factors must be documented in the medical record.
- A PCP or specialist who is providing primary care services can include member-reported data to meet this requirement. However, to be eligible, the information must include the date of service and the result.


DOES NOT MEET REQUIREMENTS:

Patient states she had a pap last year.


MEETS REQUIREMENTS:

Patient states she had a pap last year and it was negative.


Cervical Cancer Screening Codes

Description	CPT Codes
Cervical Cytology Lab Test (20-64)	88141-88143, 88147, 88148, 88150, 88152-88153, 88164-88167, 88174, 88175
HPV Tests (30-64)	87624, 87625
Hysterectomy with No Residual Cervix and Absence of Cervix Diagnosis	51925, 56308, 57530, 57531, 57540, 57545, 57550, 57555, 57556, 58150, 58152, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290-58294, 58548, 58550, 58552-58554, 58570-58573, 58575, 58951, 58953, 58954, 58956, 59135


Best Practices

- Cervical cancer screening should begin at age 21 and continue through age 64, even if there are no signs or symptoms of cervical cancer.
Exclusions: Patients who have had a hysterectomy with no residual cervix, cervical agenesis, or acquired absence of cervix.
- Primary hrHPV testing is approved by the FDA for use starting at age 25.
- Testing via hrHPV, every five years, can be considered as an alternative to cytology-only screening in average-risk patients aged 25-29.

Continued on page 3



Best Practices Cont.

- Certain risk factors increase risk for cervical cancer, which includes HIV infection, a compromised immune system, in utero exposure to diethylstilbestrol, and previous treatment of a high-grade precancerous lesion or cervical cancer. Women with these risk factors are not included in the standard recommendations for testing types and timeframes, they should receive individualized follow-up.
- HPV vaccination status does not affect the current screening recommendations.



References

1. American Cancer Society. (2023). [Key Statistics about Cervical Cancer.](#)
2. American College of Obstetricians and Gynecologists. (2021). [Cervical Cancer Screening.](#)



Support

We are committed to the care and well-being of our members. We are also committed to working with you as a partner to develop the best possible treatment plans for all patients.

Please view the Provider section of our website at [AmbetterofTennessee.com](https://www.ambetterofTennessee.com) for additional tools and resources.

You may also contact your Provider Engagement Administrator directly for support and education.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). This tip sheet has been updated with information from the release of the HEDIS® MY 2021 Volume 2 Technical Specifications by NCQA and is subject to change.

CPT codes, descriptions and other data only are copyright 2021 American Medical Association. All Rights Reserved.

Ambetter of Tennessee is underwritten by Celtic Insurance Company which is a Qualified Health Plan issuer in the Tennessee Health Insurance Marketplace. This is a solicitation for insurance.