



HEDIS® Cervical Cancer Screening (CCS) Coding Tip Sheet for Providers

As part of Community First Health Plans' ongoing efforts to improve care and ensure compliance with HEDIS® measures, we want to remind our network of Providers about the importance of accurate coding and documentation for **Cervical Cancer Screening (CCS)**.

This measure tracks the percentage of women aged 21–64 who were screened for cervical cancer according to established guidelines. Accurate coding and documentation are essential for meeting HEDIS® requirements and ensuring proper reimbursement.

Who To Screen

Clinical practice guidelines recommend women aged 21–64 who have been screened for cervical cancer with a Pap smear or HPV test during the measurement year or in the previous years as per the guidelines.

Recommended Screening Guidelines

- **Ages 21–29:** Pap smear every **3 years**.
- **Ages 30–64:** Pap smear every **3 years**, or Pap smear combined with an **HPV test** every **5 years**.
- For women who have had a hysterectomy with removal of the cervix, screening is not required unless they have a history of cervical cancer or high-grade pre-cancerous lesions.

Key HEDIS® Codes

Use the following **CPT codes** and **ICD-10 diagnosis codes** for accurate billing and reporting:

Testing Method	CPT	HCPCS	ICD-10
Cervical Cytology Lab Test	88147	G0147	
	88148	G0148	
	88142	G0141	
	88174	G0124	
	88143	G0123	
	88175	G0143	
	88141	G0145	
	88164	G0144	
	88166	P3000	
	88167	P3001	
	88165	Q0091	
	88150		
	88152		
88153			
High Risk HPV Lab Test	87624 87625	G0476	
Absence of Cervix Diagnosis			Q51.5 Z90.710 Z90.712

Common Billing Errors

To ensure accurate reporting, correct reimbursement and compliance, here are some common billing errors to avoid:

- **Incorrect Age Group:** Screening should be conducted for women aged 21–64.
- **Failure to Document Screening:** Be sure to document all screenings, distinguish between Pap smears and HPV tests, and note the appropriate test method used.
- **Incorrect Diagnosis Code:** Use Z12.4 for cervical cancer screenings and appropriate codes for routine exams.
- **Lack of Documentation for Co-testing:** If both a Pap smear and HPV test are performed, ensure both tests are documented, and corresponding codes are included.

Conclusion

Cervical cancer was one of the most common causes of cancer death for American women. Effective screening and early detection of cervical pre-cancers have led to a significant reduction in this death rate.¹ Accurate coding ensures compliance with HEDIS® measures, proper reimbursement, and improved health outcomes for the women under your care. We appreciate your continued efforts to provide high-quality care to your patients. By following these guidelines and using the correct codes, we can achieve better health outcomes and meet HEDIS® standards for cervical cancer screening.

References:

1. American Cancer Society. 2020. "Key Statistics for Cervical Cancer." <https://www.cancer.org/cancer/cervical-cancer/about/key-statistics.html> Last modified July 30.