Coding Reference Guide Measurement Year 2025 Cervical Cancer Screening (CCS-E)



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 by December 31, 2025, who had cervical cytology (Pap) test performed during 2023-2025
- *Members ages 30-64 who had cervical high-risk human papillomavirus (hrHPV) testing during 2021-2025 (includes cervical cytology/hrHPV co-testing)—Member must be 30 years of age or older on the test date

^{*}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	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	

	1.000
High Risk HPV Lab Test (cont.)	LOINC:
	104132-6, 104170-6, 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, 718591004, 448651000124104
The following codes will exclude	the Member from the measure:
	CPT:
Hysterectomy With No	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
	ICD10PCS:
Residual Cervix Any Time Through December 31, 2025	OUTCOZZ, OUTC4ZZ, OUTC7ZZ, OUTC8ZZ
· ·	SNOMED:
(ex. complete, total, or simple hysterectomy, vaginal hysterectomy)	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, 608805000, 608806004, 608807008, 708877008, 708878003, 739671004, 739672006,
	739673001, 739674007, 740514001, 740515000, 767610009, 767611008, 767612001, 1163275000,
	1287897002
	ICD10CM:
Cervical Agenesis or Acquired Absence of Cervix Any Time Through December 31, 2025	Q51.5, Z90.710, Z90.712
	SNOMED CT:
	37687000, 248911005, 428078001, 429290001, 429763009, 473171009, 723171001, 10738891000119107
Members with Male Sex	LOINC:
Assigned at Birth Any Time	76689-9 Sex assigned at birth
Through December 31, 2025	LA2-8 Male
The following will exclude the M	ember from the measure and must occur during 2025
Hospice Encounter During 2025	HCPCS:
	G9473, G9474, G9475, G9476, G9477, G9478, G9479, Q5003, Q5004, Q5005, Q5006, Q5007, Q5008, Q5010,
	S9126, T2042, T2043, T2044, T2045, T2046
	SNOMED:
	183919006, 183920000, 183921001, 305336008, 305911006, 385765002

Hospice Encounter	UBREV:
During 2025 (cont.)	0115, 0125, 0135, 0145, 0155, 0235, 0650, 0651, 0652, 0655, 0656, 0657, 0658, 0659
Hospice Intervention During 2025	CPT: 99377, 99378
	HCPCS:
	G0182
	SNOMED:
	170935008, 170936009, 385763009
Palliative Care Assessment During 2025	SNOMED:
	718890006, 718893008, 718895001, 718898004, 718899007, 718901003, 718903000, 718904006,
	718957007, 718967002, 718969004, 718971004, 718973001, 718974007, 718975008, 718976009,
	761865002, 761866001, 761867005, 457511000124100
	HCPCS:
	G9054
Palliative Care	ICD10CM:
Encounter During 2025	Z51.5 Do not include laboratory claims (claims with POS code 81).
	SNOMED:
	305284002, 305381007, 305686008, 305824005, 441874000, 713281006, 4901000124101
Palliative Care Intervention During 2025	SNOMED:
	103735009, 105402000, 395669003, 395670002, 395694002, 395695001, 443761007, 1841000124106,
	433181000124107
Members who died any time du	ring 2025

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
 - o 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
 - o 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:
 - o 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:
 - o 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