





HEDIS® Provider Reference Guide

Breast Cancer Screening (BCS-E)

People with female sex assigned at birth, or female gender at any time in the member's history, 50-74 years of age, who had at least one mammogram to screen for breast cancer in the past 27 months: 10/01/2023 to 12/31/2025

Exclusions:

- Bilateral mastectomy
- Unilateral mastectomy with bilateral
- History of gender-affirming chest surgery (CPT 19318) with diagnosis of gender dysphoria

PCP Responsibilities:

- · Document the date of the patient's last mammogram
- Order mammograms as part of preventative care visits and have office staff assist in scheduling the appointment
- HEDIS-acceptable forms of mammography: diagnostic, film, digital, or digital tomosynthesis
- MRIs, ultrasounds, and biopsies **DO NOT** count toward HEDIS compliance.
- Explicitly document the member's gender in the medical record
- Document and code exclusions found in the member's history or on exam

Key Screening Codes:

CPT: 77061-77063, 77065-77067

Key Exclusion Codes:

ICD10PCS: 0HTV0ZZ ICD10DX: Z90.13

Cervical Cancer Screening (CCS-E)

People with female sex assigned at birth, or female gender at any time in the member's history, 21-64 years of age who were recommended for routine cervical cancer screening and were who were screened for cervical cancer using any of the following criteria:

- Cervical cytology performed within the last 3 years (ages 21-64)
- Cervical high-risk human papillomavirus (hrHPV) testing within the last 5 years (ages 30-64)
- Cervical cytology high-risk human papillomavirus (hrHPV) co-testing within the last 5 years (ages 30-64)

Exclusions:

- Hysterectomy with no residual cervix, cervical agenesis, or acquired absence of cervix

PCP Responsibilities:

- Document date and result of patient's last cervical screening
- Complete screening if service offered in PCP office or refer to OB/GYN for screening. Followup for completion of screening, if done elsewhere
- Lab results that explicitly state the sample was inadequate or "no cervical cells were present" DO NOT meet HEDIS criteria
- Explicitly document the member's gender in the medical record
- · Document and code exclusions found in the member's history or on exam:
 - "Complete," "total," or "radical" hysterectomy
 - "Vaginal hysterectomy"
 - "hysterectomy" + with no residual

Key Screening Codes: **Cervical Cytology Lab Test**

(Age 21-64 every 3 years) CPT: 88141-88143, 88147-88148, 88150, 88152-88153, 88164-88167, 88174-88175 HCPCS: G0123, G0124, G0141, G0143-G0145, G0147, G0148, P3000, P3001 Q0091,

hrHPV Test

(Age 30-64 every 5 years) CPT: 87624-87625 HCPCS: G0476

Key Exclusion Codes: ICD10CM: Z90.710

• Male sex assigned at birth

Colorectal Cancer Screening (COL-E) Members 45-75 years of age who had appropriate screening for colorectal cancer

Exclusions:

- History of colorectal cancer
- History of total colectomy

PCP Responsibilities:

- Document the date of the patient's last colorectal cancer screening
- Order one of the following as part of a preventative care visit:
 - Annually: Fecal Immunochemical Test (FIT) or guaiac (gFOBT)
 - Every 3 years: Stool FIT-DNA test (Cologuard)
 - Every 5 years: Flexible sigmoidoscopy
 - Every 5 years: CT colonography

member's history or on exam

o Every 10 years: Colonoscopy • Document and code exclusions found in the

Key Screening Codes: FIT/gFOBT – Annually

• CPT: 82270, 82274

• HCPCS: G0328

sFIT-DNA Cologuard – every 3 years

• CPT: 81528

• LOINC: 77353-1, 77354-9

Flex Sig – every 5 years

- CPT: 45330-45335, 45337-45338, 45340-45342, 45346-45347, 45349-45350
- HCPCS: G0104

CT Colonography – every 5 years

• CPT: 74621-74623

Colonoscopy – every 10 years

- CPT: 44388-44392, 44394, 44401- 44408, 45378-45382, 45384-45386, 45388-45393,45398
- HCPCS: G0105 (high risk), G0121 (normal risk)

Key Exclusion Codes:

ICD10CM: Z85.038, Z85.048, C18-C21 CPT: 44150-44153, 44155-44158, 44210, 44211

Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)

Members 12 years of age and older who were screened for clinical depression using a standardized tool and, if screened positive, received follow-up care

PCP Responsibilities:

- Document the standardized tool used, date, and result of depression screening
- Incorporate the brief screening, such as PHQ-2, into your office's check-in process
- Review results during physical exam, if positive results, rescreen with a full-length tool, such as
- Refer for additional treatment
- Consider medication therapy, if needed
- Incorporate depression screening tool LOINC codes into your EMR platform, such as:
 - o PHQ-2 55758-7 positive finding >or= to 3
 - o PHQ-9 44261-6 positive finding >or= to 10

Key Screening Codes:

CPT: 96127 for brief emotional and behavioral assessments

Note: Utilization of the CPT code alone does not meet HEDIS numerator compliance without the use of the LOINC code, which indicates the tool used for screening and the total score

We want to partner with you, our valued provider, on HEDIS initiatives! Are you interested in data sharing agreements? Need help engaging our beneficiaries?

For questions or more information about HEDIS at CHRISTUS US Family Health Plan, please get in touch with us at: