

## HEDIS Hints

---

**Colorectal Cancer Screening (COL)**

# Colorectal Cancer Screening (COL)

- What is NCQA's Colorectal Cancer Screening (COL) Measure?
- Examples of Best Practices Documentation
- Coding to Improve the COL HEDIS Measure
- Questions

# What is NCQA's COL Measure?

- The percentage of members ages 45 to 75 years old who had appropriate screening for colorectal cancer.
- This measure reports the following stratification
  - 46 – 49 years old
  - 50 – 75 years old
  - Total population
- This measure is a hybrid measure, meaning it can come from chart review or codes submitted on claims.
- Exclusions:
  - History of Colorectal Cancer
  - History of a total colectomy
  - Members in hospice or who received palliative care at anytime during the measurement year
  - Members who have died in the measurement year

# What is NCQA's COL Measure?

Types of acceptable screenings are:

- Colonoscopy:
  - The colonoscopy must have been performed in the Measurement Year (MY) or nine (9) years prior to the measurement year.
- Fecal occult blood test (gFOBT and FIT):
  - The testing must have been completed in the MY.
- Flexible sigmoidoscopy:
  - The flexibly sigmoidoscopy must have been performed in the MY or four (4) years prior to the MY.
- FIT-DNA test (Cologuard):
  - The testing must have been completed in the MY or two (2) years prior to the MY.
- CT-Colonography:
  - The CT-Colonography must have been performed in the MY or four (4) years prior to the MY.

# Examples of Best Practices Documentation

- Review HPP's member level reports in our provider portal to identify noncompliant members.
- Submit any codes via a claim that can satisfy that a screening was completed.
- If a patient reports that they had a colonoscopy in the past, ask them for results, when they got the screening, and the provider/site where the screening was completed.
- Document any screening tests in the patient's medical history with the date of service of the screening and the result.
- Save a copy of the screening report with the result in the medical record.
- **Do not code** for a completed test unless you have the test results.
  - If you ordered the screening, the test **must be completed** for the care gap to be closed.

# Patient Education Practices

- Explain the purpose of preventive cancer screenings to your patients.
- Discuss the methods of screening with the patient and decide on the best method for that patient.
- If you order a screening for the patient, follow up with the patient to make sure the screening was completed.

# Coding to Improve this HEDIS Measure

## CPT:

- Colonoscopy: 44388-44392, 44393\*, 44394, 44401-44408, 45378-45382, 45384-45386, 45388-45393, 45398
- Fecal occult blood test (gFOBT and FIT): 82270, 82274
- Flexible sigmoidoscopy: 45330-45335, 45337, 45338, 45340-45342, 45346, 45347, 45349, 45350
- FIT-DNA test (Cologuard): 81528
- CT-Colonography: 74261-74263

## HCPCS:

- Colonoscopy: G0105, G0121
- Fecal occult blood test (gFOBT and FIT): G0328
- Flexible sigmoidoscopy: G0104
- FIT-DNA test (Cologuard): G0464\*

\* Code is not on the HPP fee schedule but will count towards the care gap being closed.

# Questions?

Please contact [ProviderEducation@hpplans.com](mailto:ProviderEducation@hpplans.com) or  
Teresa McKeever MS, BSN, RN Director, Quality Management  
[tmckeeper@hpplans.com](mailto:tmckeeper@hpplans.com)