Colorectal Cancer Screening (COL-E)

Description of Measure

Percentage of patients 45 – 75 years of age as of Dec. 31, measurement year (MY), who had appropriate screening for colorectal cancer: colonoscopy, CT colonography, flexible sigmoidoscopy, FIT-DNA, or fecal occult blood test (FOBT).¹

Documentation

Screening Test	Frequency
Fecal Occult Blood (FOBT)	Annually
Cologuard/ FIT-DNA	Every three years, 2 years prior through MY
Flexible Sigmoidoscopy	Every five years, 4 years prior through MY
CT Colonography	Every five years, 4 years prior through MY
Colonoscopy	Every ten years, 9 years prior through MY

- Member reported must state specific colon cancer screeming and date.
- Member report colon cancer screenings are acceptable when reported to a primary care provider or a specialist, if the specialist is providing a primary care service related to the condition being assessed, while taking a patient's history.
- Notation of a completed specified colon cancer screening with DOS as part of the medical history. Health maintenance and preventive care sections are considered "history" sections.
- A letter/correspondence must document a specific colon cancer screening test with a completion date of "done today/today" within the body of the letter to meet COL criteria.
- A pathology report that indicates the type of screening and the date meets criteria.
- Member refusal will <u>not</u> make them ineligible for this measure.
- Digital rectal exams (DRE) or FOBT test performed in the office setting will <u>not</u> meet compliance.

Test Type	Unknown	Guaiac (gFOBT)	FIT (iFOBT)	Unknown
Samples Returned	Unknown or 3 or >	Documented 3 or >	Any # or unknown	Documented 1 -2
Status	Compliant	Compliant	Compliant	Unacceptable Non-compliant



Exclusions

Exclusions	Time	e limit	
 Members who elect or use hospice services 	Any time during measurement year (MY)		
Member deceased			
 Members receiving palliative care 			
 Colorectal cancer 	Anytime in member's history the	hrough Dec. 31 MY	
Total colectomy			
Members 66 years of age and older	 Frailty diagnosis on 2 different DOS during the MY 		
by Dec. 31 MY with Advanced Illness	 Advanced Illness: Either of the following during the MY or PY 		
and Frailty.	- Advanced illness diag	nosis on 2 different DOS	
Members must meet BOTH frailty and	- Dispensed a dementia medication		
advanced illness criteria to be excluded.	Dementia Med Description	Prescription	
	Cholinesterase inhibitors	Donepezil	
		Galantamine	
		Rivastigmine	
	Misc. CNS Agents	Memantine	
	Combinations	Donepezil-memantine	

Exclusion Codes

CPTII Code	Definition
Z85.038	Personal history of other malignant neoplasm of large intestine
Z85.048	Personal history of other malignant neoplasm of rectum, rectosigmoid junction, and anus
C18.0-9, C19-20, C21.2, C21.8, C78.5	Colorectal cancer, active

Strategies for Success	 If a patient has family history of colon cancer, encourage a colonoscopy instead of a Cologuard. Use the Annual Wellness visit to schedule screenings. Add screenings to annual assessment form/ EMR template. Implement a referral tracking process. For patients refusing colonoscopy, recommend a FIT-DNA or FOBT kit.
	Educate patients on preparation for the ordered tests.

Resources

I. National Committee for Quality Assurance, HEDIS® Measurement Year 2025 Volume 2 Technical Specifications for Health Plans

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