

Colorectal Cancer Screening (COL-E)

Description of Measure

Percentage of patients 50 – 75 years of age as of Dec. 31, measurement year (MY), as of 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 completed specified colon cancer screening with DOS.
- 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 pathology report that indicates the type of screening and the date meets criteria.
- Member refusal will **not** make them ineligible for this measure.
- Digital rectal exams (DRE) or FOBT test performed in the office setting will **not** meet compliance.

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|-------------------------|-------------------|-------------------|------------------|-------------------------------|
| 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 limit | | | | | | | | |
|---|--|--------------------------|--------------|---------------------------|--|------------------|---|--------------|---|
| <ul style="list-style-type: none"> Members who elect or use hospice services Member deceased Members receiving palliative care | Any time during measurement year (MY) | | | | | | | | |
| <ul style="list-style-type: none"> Colorectal cancer Total colectomy | Anytime in member's history through Dec. 31 MY | | | | | | | | |
| <p>Members 66 years of age and older by Dec. 31 MY with Advanced Illness and Frailty.</p> <p>Members must meet BOTH frailty and advanced illness criteria to be excluded.</p> | <ul style="list-style-type: none"> Frailty diagnosis on 2 different DOS during the MY Advanced Illness: Either of the following during the MY or PY <ul style="list-style-type: none"> Advanced illness diagnosis on 2 different DOS Dispensed a dementia medication <table border="1"> <thead> <tr> <th>Dementia Med Description</th> <th>Prescription</th> </tr> </thead> <tbody> <tr> <td>Cholinesterase inhibitors</td> <td> <ul style="list-style-type: none"> Donepezil Galantamine Rivastigmine </td> </tr> <tr> <td>Misc. CNS Agents</td> <td> <ul style="list-style-type: none"> Memantine </td> </tr> <tr> <td>Combinations</td> <td> <ul style="list-style-type: none"> Donepezil-memantine </td> </tr> </tbody> </table> | Dementia Med Description | Prescription | Cholinesterase inhibitors | <ul style="list-style-type: none"> Donepezil Galantamine Rivastigmine | Misc. CNS Agents | <ul style="list-style-type: none"> Memantine | Combinations | <ul style="list-style-type: none"> Donepezil-memantine |
| Dementia Med Description | Prescription | | | | | | | | |
| Cholinesterase inhibitors | <ul style="list-style-type: none"> Donepezil Galantamine Rivastigmine | | | | | | | | |
| Misc. CNS Agents | <ul style="list-style-type: none"> Memantine | | | | | | | | |
| Combinations | <ul style="list-style-type: none"> 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 | <ul style="list-style-type: none"> 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. |
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Resources

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

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