



# Women's health HEDIS<sup>®</sup> measures

## BCS — BREAST CANCER SCREENING

Female members ages 52 to 74 as of December 31 of the measurement year who had one or more mammogram screenings anytime on or between October 1 two years prior and December 1 of the measurement year

### DOCUMENTATION MUST INCLUDE ONE OF THE FOLLOWING:

- Month and year the screening was performed
- The radiology report of the mammogram
- Documentation of history of bilateral mastectomy

### COMMON CHART DEFICIENCIES:

- MRIs, ultrasounds or biopsies of the breast alone do not count
- Incomplete documentation related to bilateral mastectomy

## CCS — CERVICAL CANCER SCREENING

Female members ages 24 to 64 who had cervical cytology performed during the year or two years prior.

OR

Women ages 30 to 64 who had a cervical high-risk human papillomavirus (hrHPV) test within the year or four years prior and were at least 30 years old on the date of the test.

### DOCUMENTATION MUST INCLUDE ONE OF THE FOLLOWING:

- Date and result of cervical cancer screening test
- Date and result of hrHPV test (generic documentation of HPV test can be counted)
- Evidence of hysterectomy with no residual cervix or acquired absence of cervix

### COMMON CHART DEFICIENCIES:

- Incomplete documentation related to hysterectomy

HEDIS<sup>®</sup> is a registered trademark of the National Committee for Quality Assurance (NCQA).

## CHL —

### CHLAMYDIA SCREENING

Female members ages 16 to 24 who were identified as sexually active and had at least one test for chlamydia during the measurement year

#### DOCUMENTATION MUST INCLUDE:

- Date and result of chlamydia test
- Documentation of reason of completing pregnancy test if not related to sexual activity (for example: upcoming x-ray or issuance of prescription for isotretinoin medication)

#### COMMON CHART DEFICIENCIES:

- Lack of documentation related to women's health in PCP charts
- Incomplete documentation related to purpose of pregnancy testing

## PPC —

### PRENATAL AND POSTPARTUM CARE

Female members who delivered a live infant between October 8 of the year prior and October 7 of the measurement year who received timely prenatal and postpartum care.

#### DOCUMENTATION MUST INCLUDE:

- A prenatal visit within the first trimester of pregnancy (or within 42 days of enrollment)
- A postpartum visit between 7 and 84 days after delivery

#### COMMON CHART DEFICIENCIES:

- Ultrasound and lab results alone do not count towards a prenatal visit — Must be combined with an office visit with an appropriate practitioner.
- A pap test does not count for a prenatal visit
- Prenatal visits with a PCP must include a diagnosis of pregnancy

If you have questions, contact your local Provider Relations representative or Provider Services at **866-231-0847**.

<https://providerpublic.mybcbswny.com>

Highmark Blue Cross Blue Shield of Western New York partners with Amerigroup companies to administer certain services to Medicaid Managed Care (MMC) and Child Health Plus (CHPlus) members. Please note, this information is specific to the MMC and CHPlus programs only.

Amerigroup Partnership Plan, LLC provides management services for Highmark Blue Cross Blue Shield of Western New York's managed Medicaid. Amerigroup Partnership Plan, LLC brinda servicios administrativos para Medicaid administrado de Highmark Blue Cross Blue Shield of Western New York.

Highmark Blue Cross Blue Shield of Western New York is a trade name of Highmark Western and Northeastern New York Inc., an independent licensee of the Blue Cross Blue Shield Association. Highmark Blue Cross Blue Shield of Western New York es un nombre comercial de Highmark Western y Northeastern New York Inc., un licenciataria independiente de Blue Cross Blue Shield Association.

NYWPEC-2275-21