HEDIS Measure: Colorectal Cancer Screening (COL)

We are committed to working with you to improve the quality of care and health outcomes for our members, your patients. HEDIS® (Healthcare Effectiveness Data and Information Set) is one tool we use to measure many aspects of performance. This document details some of the key features of the HEDIS measure for colorectal cancer screening.

What is the measure?

This measure focuses on members ages 50 to 75 who had appropriate screening for colorectal cancer. Appropriate screenings are defined by one of the following:

- Fecal occult blood test (FOBT) during the measurement year.
- Flexible sigmoidoscopy during the measurement year or the four years prior to the measurement year.
- Colonoscopy during the measurement year or the nine prior years.
- Computerized tomography (CT) colonography during the measurement year or the four prior years.
- Fecal immunochemical test (FIT)-DNA (Cologuard®) test during the measurement year or the two prior years.

Acceptable Forms of Documentation

Documentation in the medical record must include the note indicating the date when the colorectal cancer screening was performed. Pathology Report – indication of the type of screening (colonoscopy, flexible sigmoidoscopy) and the date when the screening was done.

- For colonoscopy and flexible sigmoidoscopy - a result is NOT required if the documentation is clearly part of the medical history section of the record.
- If it is unclear whether the documentation is part of the medical history, the result or finding must be present. This ensures that the screening was performed and not merely ordered.
- Member reported colorectal cancer screenings will count if performed and/or documented in the measure time frame (e.g., member reports colonoscopy in 2015 was normal).
- FOBT during the measurement year.
- FIT –DNA test during the measurement year or the two years prior to the measurement year.

There are two types of FOBT tests: guaiac (gFOBT) and immunochemical (FIT). Depending on the type of FOBT test, a certain number of samples are required for numerator compliance. Follow these four steps to determine member compliance:

1. If the medical record does not indicate the type of test and there is no indication of how many samples were returned, assume the required number was returned. The member meets the screening criteria for inclusion in the numerator.

(continued next page)
HEDIS Measure: Colorectal Cancer Screening (continued)

Acceptable Forms of Documentation (continued)

2. If the medical record does not indicate the type of test and the number of returned samples is specified, the member meets the screening criteria only if the number of samples specified is greater than or equal to three samples. If there are fewer than three samples, the member does not meet the screening criteria for inclusion.

3. FIT tests may require fewer than three samples. If the medical record indicates that FIT was done, the member meets the screening criteria, regardless of how many samples were returned.

4. If the medical record indicates that a gFOBT was done, follow the scenarios below:
   - If the medical record does not indicate the number of returned samples, assume the required number was returned. The member meets the screening criteria for inclusion in the numerator.
   - If the medical record indicates that three or more samples were returned, the member meets the screening criteria for inclusion in the numerator.

Unacceptable Forms of Documentation

Unacceptable forms of documentation are:

1. A digital rectal exam (DRE) does not count as evidence of a colorectal cancer screening because it is not specific enough to screen for colorectal cancer.

2. FOBTs performed in an office setting or performed on a sample collected via DRE do not meet criteria.

Exclusions

Either of the following, any time during the member’s history through December 31 of the measurement year, are exclusions for this measure:

- Colorectal cancer (Colorectal Cancer Value Set)
- Total colectomy (Total Colectomy Value Set)

Hospice care during the measurement year is an exclusion from the measure.