

COLORECTAL CANCER SCREENING

Measurement Specifications for Star Ratings Program



Measurement Description

Percent of patients aged 50 – 75 who had appropriate screening for colon cancer.

Measurement Source

HEDIS 2020-2021

Denominator

Patients aged 50 – 75 as of the end of the measurement year.

Numerator

Eligible patients with appropriate screening for colon cancer as defined by the screenings below:

Fecal occult blood test (FOBT)	FOBT during the measurement year. <i>Do not count</i> digital rectal exams (DRE), FOBT tests performed in an office setting or performed on a sample collected via DRE.
Flexible Sigmoidoscopy	During the measurement year or the four years prior to the measurement year.
Colonoscopy	During the measurement year or the nine years prior to the measurement year.
FIT-DNA Testing	During the measurement year or the two years prior to the measurement year.
CT Colonography	During the measurement year or the four years prior to the measurement year.

Exclusion Criteria

Colectomy / Cancer	Diagnosis of total colectomy or colon cancer
Hospice	For Medicare reporting, exclude patients who actively receive hospice services any time during the measurement year

Exclude from Medicare reporting members age 65 and older as of January 1 of the measurement year who meet either of the following:

- Enrolled in an Institutional SNP (I-SNP) any time during the measurement year.
- Living long-term in an institution any time during the measurement year as identified by the LTI flag in the Medicare Part C monthly membership file.

Supplemental Data

Provision of numerator compliant screening tests for patients who had appropriate screening or verification of exclusionary data.

Best Practice

- Ensure patients with ileostomies, which imply colon removal, and patients with a history of colon cancer have been clearly documented as these are exclusions.
- Empower office staff to educate patients on the importance of routine colorectal cancer screening and to provide outreach to non-compliant patients
- Use an EMR or billing system to notify providers of upcoming or overdue screening needs and refer/order the screening at the time of the patient's office visit.
- Consider hosting FOBT 'clinic' hours that patients could drop in for an FOBT
- Provide FOBT kits for use in patient's homes by direct distribution or mail.
- Annually review patient history ensuring colorectal cancer screening is up to date AND documented correctly listing date of test or procedure and result.

Star Ratings Performance Thresholds

Year	1 STAR	2 STARS	3 STARS	4 STARS	5 STARS
2014	< 40%	≥ 40% to < 49%	≥ 49% to < 58%	≥ 58% to < 65%	≥ 65%
2015	< 41%	≥ 41% to < 52%	≥ 52% to < 58%	≥ 58% to < 65%	≥ 65%
2016	< 51%	≥ 51% to < 63%	≥ 63% to < 71%	≥ 71% to < 78%	≥ 78%
2017	< 55%	≥ 55% to < 62%	≥ 62% to < 71%	≥ 71% to < 81%	≥ 81%
2018	< 54%	≥ 54% to < 63%	≥ 63% to < 72%	≥ 72% to < 80%	≥ 80%
2019	< 55%	≥ 55% to < 63%	≥ 63% to < 72%	≥ 72% to < 79%	≥ 79%
2020	< 43%	≥ 43% to < 62%	≥ 62% to < 73%	≥ 73% to < 80%	≥ 80%
2021	< 43%	≥ 43% to < 62%	≥ 62% to < 73%	≥ 73% to < 80%	≥ 80%

