Select Health of South Carolina Corporate Specifications for Gaps in Care

Colorectal Cancer Screen

- The purpose of this measure is to identify and track members who are due for Colorectal Cancer Screening (COL) as recommended by the American Cancer Society and by the Centers for Disease Control and Prevention (CDC). *
- Criteria are based on standards as established under HEDIS[®] 2013 Technical Specifications.

Which Members are Included? (Denominator)	 Members with active coverage with the insurance plan as of the last day of the reporting period Members between 51 and 80 years old as of the last day of the reporting period.
What Provider Data is Included? (Numerator)	Member received at least one colorectal screening (Colonoscopy, Fetal Occult Blood Test, or Flexible Sigmoidoscopy) every one to five years (test dependent)
Provider Communication Tools (How providers receive the information)	Claims data is evaluated on a monthly basis for all members. In the event that there is no claim for this specific service, the system generates an automatic notice of care gap. Care Gap status notification is provided by and accessible through NaviNet via: Member Eligibility "pop-up" alerts Care Gap Query Reports Member Clinical Summary Reports Monthly NaviNet report updates reflect Gaps In Care for PCP practice panel membership. Panel membership results include indicators for this Gaps In Care measure as "Missing", "Up-to-date" or "Overdue."

*For more information, visit:

http://www.cancer.org/cancer/colonandrectumcancer/detailedguide/index http://www.cdc.gov/cancer/colorectal/

For detailed code criteria, click here.

Revised: May 2013