

Measure Requirements

- Members 21 through 64, as of December 31 of the measurement year (2024) who were recommended for routine cervical cancer screening and had cervical cytology performed during the measurement year (2024) or two years prior to the measurement year (2023 and 2022).
- Members 30 through 64, as of December 31 of the measurement year (2024) who were recommended for routine cervical cancer screening and had cervical high-risk human papillomavirus (hrHPV) testing performed during the measurement year (2024) or the four years prior to the measurement year (2023, 2022, 2021, 2020).
- Members 30 through 64 as of December 31 of the measurement year (2024) who were recommended for routine cervical cancer screening and had cervical cytology/high-risk human papillomavirus (hrHPV) cotesting during the measurement year (2024) or the four years prior to the measurement year (2023, 2022, 2021, 2020).



Member Requirements

Members who were with a practice for 11 consecutive months within the measurement year (2024) and who were 24 through 64 as of December 31 of the measurement year (2024).



QPM Targets	
Band 1	81% – 100%
Band 2	78% – 80.99%
Band 3	74% – 77.99%
Band 4	70% – 73.99%
Band 5	<70%

See payment details in section 5 of guide.

Options to close Care Gaps

- **Option 1:** Claim/encounter submission with appropriate coding of Pap tests or hrHPV during 2024.
- **Option 2:** Claim/encounter submission with appropriate exclusion coding for complete, total, or radical abdominal or vaginal hysterectomy with no residual cervix. Sex assigned at birth (LOINC code 76689-9) of male (LOINC code LA2-8) at any time in the patient's history.

Absence of Cervix exclusion codes

Q51.5 – Agenesis and aplasia of cervix

Z90.710 – Acquired absence of both cervix and uterus

Z90.712 – Acquired absence of cervix with remaining uterus