## **HEDIS®** Tip Sheet

# Colorectal Cancer Screening (COL)



Point32Health's HEDIS Tip Sheets outline key features of specific HEDIS measures. These best practices and tips can optimize HEDIS scores and identify opportunities to improve patient care.

The COL measure assesses the percentage of members ages 45-75 who had appropriate screening for colorectal cancer during the measurement year.



#### **Provider Best Practices**

- Place standing orders for office staff to dispense fecal occult blood test (FOBT) or Stool DNA (sDNA) with fecal immunochemical test (FIT) kits to patients needing colorectal cancer screening.
- **Educate** patients on the importance of screening for colorectal cancer even when there is no family history of the disease.
- Encourage patients who are resistant to having a colonoscopy to perform an at-home stool test (either guaiac fecal occult blood test (gFOBT) or immunochemical fecal occult blood test (iFOBT).
- Update patient charts yearly to indicate colorectal cancer screening. Include which test was performed, date of screening, and test result.



### **Screening Criteria**

Any of the following meet the criteria for colorectal cancer screening:

- Fecal occult blood test in the measurement year
  - FOBT performed in an office or performed on a sample collected via digital rectal exam (DRE) do not meet HEDIS criteria.
- Stool DNA with FIT test in the measurement year or 2 years prior
- Flexible sigmoidoscopy in the measurement year or 4 years prior
- CT colonography in the measurement year or 4 years prior
- Colonoscopy in the measurement year or 9 years prior

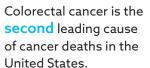
Starting in calendar year 2024, the HEDIS colorectal cancer screening measure will be assessed using only electronic clinical data systems. (Medical records will not be collected.) Please contact your contract manager to discuss setting up an EMR data feed submission process.



#### **Additional Resources**

Additional provider information, including downloadable patient education materials, can be found at <u>Colorectal Cancer Alliance</u>, Fight Colorectal Cancer, American College of Gastroenterology.





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According to the National Cancer Institute, the rate of colorectal cancer in adults younger than 50 years of age has doubled since the 1990s.

Past research shows that colonoscopy is associated with as much as a 69% decrease in new cases of colorectal cancer and an 88% decrease in the risk of death from it.





