## Colorectal Cancer Screening Tip Sheet

### What is the CMS Star Rating Program?

CMS uses a five-star quality rating system to measure the experiences Medicare beneficiaries have with their health plan and healthcare system – the Star Rating Program. Health plans are rated on a scale of 1 to 5 stars, with 5 being the highest. These ratings are then published on the Medicare Plan Finder at [medicare.gov](http://medicare.gov) to raise the quality of care for Medicare beneficiaries, strengthen beneficiary protections and help consumers compare health plans more easily.

<table>
<thead>
<tr>
<th>Measure Description</th>
<th>Weight: 1</th>
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<tr>
<td>This measure shows the percent of plan members aged 45-75 who had appropriate screening for colon cancer.</td>
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### Measure Source

- Claims & Chart Review.

### Stars/Quality Specifications

Eligible Patient has had:

- Fecal Occult Blood Test (FOBT) – every year.
- Flexible Sigmoidoscopy – one every 5 years.
- Colonoscopy – one every 10 years.
- CT Colonography – one every 5 years.
- Stool DNA with FIT Test (Cologuard) – one every 3 years.

### Strategies for Success

- Encourage patients to have colon cancer screening appropriate for their risk level.
- Use culturally sensitive counseling and behavioral interviewing.
- Discuss family history of colon cancer with the patient.

### Coding and Documentation Tips

Exclusionary criteria includes:

- Hospice, palliative care or deceased members during measurement year.
- Colorectal cancer any time during member’s history through December 31\textsuperscript{st} of measurement year.
- Total colectomy any time during member’s history through December 31\textsuperscript{st} of measurement year.

Member may be excluded from this measure due to frailty and/or advanced illness. Click the following link to review the master code list for exclusions: [Exclusion Codes](#)

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If you have any questions, please contact your Provider Relations Specialist.