



Cervical Cancer Screening Services Policy

Effective January 2023

Women's Way provides regular cervical cancer screening for women between the ages of 21 and 64 who are low income (up to 200% of the Federal Poverty Level), uninsured, and underinsured women (whose health insurance does not fully cover screening services).

Women Ages 21 through 39

Women's Way services are available for women between the ages of 21 and 39 who:

- have not had a Pap test within the last 3 to 5 years and need a Pap test according to the current screening guidelines.
- are in need of a follow-up Pap test for a previous abnormal result.
- are in need of a cervical diagnostic procedure.

Eligible women ages 21 through 29 can receive:

- Pap test per CDC recommendations
 - Conventional or Liquid-Based Pap test every 3 years.
 - HPV testing **only if have had an abnormal Pap test** and HPV testing is recommended according to the ASCCP (American Society for Colposcopy and Cervical Pathology) guidelines.
 - See page 2 for guidelines for women who have had a hysterectomy.
- Diagnostic services or consultation as listed in *Women's Way* CPT code Medicare Part B rate list, if needed.

Eligible women ages 30 through 39, can receive:

- Pap test per CDC recommendations
 - Conventional or Liquid-Based Pap test every 3 years with Pap test alone or
 - Every 5 years with combination of Pap test and HPV or
 - Every 5 years with primary HPV testing
 - See page 2 for guidelines for women who have had a total hysterectomy.
- Diagnostic services or consultation as listed in *Women's Way* CPT code Medicare Part B rate list, if needed.

Re-enrollment of Women Ages 21 through 39

Uninsured or underinsured women ages 21 through 39 can re-enroll the following year only if they are currently in the process of follow-up for abnormalities found during first enrollment period or are at high risk and need more frequent Pap tests.

Women Ages 40 through 64

Women's Way services are available for women between the ages of 40 and 64 who:

- have not had a Pap test within the last 3 to 5 years and need a Pap test according to the current screening guidelines.
- are in need of a follow-up Pap test for a previous abnormal result.
- are in need of a cervical diagnostic procedure.

Eligible women ages 40 through 64, can receive:

- Annual pelvic examination.
- Pap test per CDC recommendations
 - Conventional or Liquid-Based Pap test every 3 years with Pap test alone or
 - Every 5 years with combination of Pap test and HPV or
 - Every 5 years with primary HPV testing

- See page 2 for guidelines for women who have had a total hysterectomy.
- Diagnostic services or consultation as listed in *Women's Way* CPT code Medicare Part B rate list, if needed.

Other Ages – Women 65 and older

- Women aged 65 should follow the normal screening recommendations.
- Women older than 65 years should not be screened provided prior screenings were adequate and they are not otherwise at high risk for cervical cancer.

High Risk Individuals

Women with the following risk factors may require to be screened more frequently.

- Women infected with HIV.
- Women who are immuno-suppressed (e.g. recipient of organ transplant).
- Women who were exposed to DES (diethylstilbestrol) in utero.
- Women who were previously treated for CIN 2, CIN 3, or cervical cancer.

In general, women under the age of 30 who are at high risk should undergo annual Pap testing and women aged 30 years and older should have co-testing every 3 years or annual Pap testing.

Women who have had a total hysterectomy (includes removal of cervix)

- If the hysterectomy was due to cervical cancer or neoplasia, the client will be eligible for regular cervical cancer screenings.
 - For those with a history of cervical neoplasia or in situ disease, *Women's Way* reimburse for routine cervical cancer surveillance for 20 years post treatment.
 - For those with a history of invasive cervical cancer, *Women's Way* can reimburse for cervical cancer surveillance indefinitely, if the woman is in good health.
- If the hysterectomy was performed for any other reason, and the woman does not know if she still has a cervix, a pelvic exam can be done to confirm the presence or absence of the cervix. If there is no cervix, *Women's Way* cannot pay for Pap tests.
- If the reason for the hysterectomy or the final diagnosis of no neoplasia or invasive cancer is unknown, *Women's Way* funds can be used to reimburse for cervical cancer screening. Cervical cancer screening should continue until there is a 10-year history of negative screening results, including the documentation that the Pap tests were technically satisfactory.

Human Papillomavirus (HPV) Testing

- HPV testing is a reimbursable procedure when used as described in the ASCCP guidelines.
- HPV testing is reimbursable as an adjunctive screening test to Pap test (co-testing) for women ages **30 and older**. Providers should specify the high-risk HPV DNA panel only; reimbursement of screening for low-risk genotypes of HPV is not permitted.
- HPV testing is reimbursable as a primary screening test for women ages 30 and older.

Cervical Cancer Screening for Transgender Men

Transgender men (female to male) who have not undergone a total hysterectomy (i.e., still have a cervix) and meet all other eligibility requirements are eligible to receive cervical cancer screening and diagnostic screenings through *Women's Way*.

Note:

- At least 35 percent of all clients *newly* enrolled for cervical cancer screening should be women who have never been screened for cervical cancer or who have not had a Pap test in the past 10 years

| Last review date | |
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| 1/4/2023 | bas |
| 10/2022 | bas |
| 08/2021 | smm |