

[Date]

[Provider name] [Provider address] [Provider address 2] [City, State ZIP code]

Update: Routine cervical cancer screening

Dear Provider:

We recently communicated with you regarding cervical cancer screening coverage for women younger than 21 years of age. This communication provides new coverage information on the frequency of cervical cancer screening of women at average risk. It does not address women with a history of prior abnormal results, precancerous cervical lesions, cervical cancer or those who are immunocompromised.

Additional coverage information

As previously communicated, routine screening pap testing will not be reimbursed for women younger than 21 years of age. In addition, effective [insert date 90 days from alert mailing] routine screening frequency for women age 21 to 65 will be reimbursed no more frequently than once every three years. Also, reimbursement for routine Pap testing for women 66 and older, with prior negative screening results, will be denied.

Screening method and intervals

The U.S. Preventive Services Task Force¹, the American College of Obstetricians and Gynecologists², the American Cancer Society³, the American Society for Colposcopy and Cervical Pathology and the American Society for Clinical Pathology all agree that the optimal screening interval is not more frequently than every three years.

| Population | Recommended screening |
|-----------------------------|---|
| Women younger than 21 years | No screening |
| Women aged 21-29 years | Cervical Pap alone every three years |
| Women aged 30-65 years | Human papillomavirus (HPV) and cervical Pap co-testing every five years or cervical Pap alone every three years |
| Women older than 65 years | No screening is necessary after adequate negative prior screening results |

| Women who underwent total hysterectomy | No screening is necessary |
|--|---------------------------|
| (with no residual cervix) | |

We encourage you to adopt this medical society and industry recommendation in the interest of improving patient quality and reducing harm from unnecessary follow up.

Sincerely,

Dr. Brandon C. Charles, Medical Director Wellpoint

- 1. United States Preventive Services Task Force. Cervical Cancer. March 2012.
- 2. American College of Obstetricians and Gynecologists. Practice Bulletin Number 157: Screening for Cervical Cancer. Obstet Gynecol. 2016; 127:el-20.
- 3. Saslow D, Solomon D, Lawson HW, et al. American Cancer Society, American Society for Colposcopy and Cervical Pathology, and American Society for Clinical Pathology screening guidelines for the prevention and early detection of cervical cancer. CA Cancer J Clin 2012; 62:147-72.