

Cervical Cancer screening

Adjudication Guideline

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1. Abstract

1.1 For Members

When cancer starts in the cervix, it is called cervical cancer. The cervix is the lower, narrow end of the uterus. Also known as the womb, the uterus is where a baby grows when a woman is pregnant. The cervix connects the upper part of the uterus to the vagina (the birth canal). All women are at risk for cervical cancer. It occurs most often in women over age 30.

Cervical cancer is the easiest female cancer to prevent, with regular screening tests and follow-up. Two screening tests can help prevent cervical cancer or find it early:

- 1. The Pap test (or Pap smear) looks for pre-cancers, cell changes on the cervix that
- might become cervical cancer if they are not treated appropriately.
- 2. The HPV test looks for the virus (human papilloma virus human papillomavirus)
- that can cause these cell changes.

The Pap test can be done in a doctor's office or in a clinic. During this test, the vagina and the cervix are examined; and then the doctor will collect few cells and mucus from the cervix and from the area around it. Then, these cells are sent to a laboratory to check if they are normal.

1.2 For Medical Professionals

The aim of this adjudication Rule is to highlight the coverage and the medical necessity of the Cervical Cancer Screening, for all the health insurance plans administered by Daman.

Cervical cancer is preventable and curable, if detected early. Important strategies to reduce the risk of cervical cancer include screening with the Papanicolaou (Pap) and, for some women, human papillomavirus (HPV) tests, as well as prevention of HPV infection with the HPV vaccine.

Daman covers the cervical Cancer screening for:

- Thiqa plans based on the DOH Standards for the Cervical Cancer Screening.
- Premier, Enhanced and Core Series compliant to DOH regulator except Basic (Abu Dhabi) plan and TC plans, as per the criteria listed in the eligibility section.

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2. Scope

The aim of this adjudication Rule is to highlight the coverage and the medical necessity of the Cervical Cancer Screening, for all the health insurance plans administered by Daman.

3. Adjudication Policy

3.1 Eligibility / Coverage Criteria

- 1. Daman covers the cervical Cancer screening for:
 - Thiqa plans based on the DOH Standards for the Cervical Cancer Screening.

- Premier, Enhanced and Core Series plans compliant to DOH regulator.

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Conditions	Recommendations			
When to start the cervical cancer screening.	All sexually active women, symptom free, aged between 25-69 years. Women aged <25 years should not be screened regardless of age at sexual initiation and other behavior-related risk factors.			
When to stop the cervical cancer	Women aged >69 with evidence of adequate negative prior screening** and no history of CIN2+ within the last 20 years should not be screened. Screening should not be resumed for any reason, even if a woman reports having a new sexual partner.			
screening.	Women aged >69 with evidence of inadequate screening history, then they should follow the DOH clinical care pathway for cervical cancer follow and check-ups			
Cervical Cancer Screening in post- hysterectomy.	In a total hysterectomy for benign indications, women should stop screening and not restart for any reason. Note: if women had any kind of hysterectomy for a malignancy reason, then they should follow the clinical care pathway related to cervical cancer. In a supra-cervical hysterectomy (cervix intact), women should continue screening as per the guidelines.			
Cervical Cancer Screening among women who have been vaccinated against Human papillomavirus (HPV).	Women, who have been immunized against the HPV 16/18, should be screened according to the age, the same as women who have not been vaccinated.			
Annual Screening.	Annual screening by any screening method is not recommended for women of any age group. Women who are immune-compromised due to diseases (including HIV) or medication must have annual screening.			

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- 2. For the Enhanced and DHA plans, test coverage under the screening benefit is only limited to Papanicolaou test (PAP Test).
- 3. Pre-authorization request must be submitted prior to avail the service and providers should use the proper ICD10 screening codes. Failure to obtain pre-authorization will lead to claims denials.

Pre-authorization Coverage criteria of the Cervical Cancer Screening				
Plan/Provider sector	Pre-authorization required			
Thiqa in Private/Non-SEHA	Yes			
Thiqa in SEHA	No			
Enhanced at any sector	Yes			
DHA plans at any sector	Yes			

^{**} Adequate negative prior screening is three consecutive negative cytology results or two consecutive negative co-tests within the 10 years before cessation of screening, with the most recent test occurring within the past years.

Cervical Cancer Screening Plan wise coverage:					
Plan	Frequency of the Cervical Cancer Screening				
	Test	Age	Recommendations		
	Papanicolaou test (Pap test) [with liquid based cytology]	25-29 years of age	Every 3 years		
Thiqa	Papanicolaou test (Pap test) [with liquid based cytology]	30-69 years of age + HPV TEST* to be done as a co-test with the Pap test	Every 5 years		
		Any age between 25 – 69 (married, divorced, widowed) for immune-compromised women	Annually		
Enhanced	Papanicolaou test (Pap test) [with liquid based cytology]	25-49 years of age	Every 3 years		
and DHA		50-65 years of age	Every 5 years		

^{*}Only FDA HPV approved tests are the accepted test for screening

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3.2 Requirements for Coverage

ICD and CPT codes must be coded to the highest level of specificity.

3.3 Non-Coverage

- Daman does not cover the Cervical Cancer Screening for Basic and TC plans.
- Daman does not cover any HPV test not approved by FDA, as indicated in the MOH and DOH standards for cervical cancer screening
- Daman does not cover the HPV Screening test for the plans: Enhanced, DHA, Basic and TC.
- Daman does not cover any specimen collection and preparation of adequate Pap or HPV test done by other than Licensed gynecologists, obstetricians.
- Daman does not cover the cervical cancer screening if:
 - The patient has received a total hysterectomy for benign indications, as it is not medically indicated.
 - The patient if over 69 years of age with an adequate screening history: the last three previous smears were found negative.
 - The patient is < 25 years of age, regardless of if she is sexually active or not.

3.4 Payment and Coding Rules

Please apply DOH payment rules and regulations and relevant coding manuals for ICD, CPT, etc.

4. Denial Codes

Code	Code Description
CODE-014	Activity/diagnosis is inconsistent with the patient's age/gender
CLN-001	Activity/diagnosis is inconsistent with clinician speciality
MNEC-004	Service is not clinically indicated based on good clinical practice
MNEC-005	Service/supply may be appropriate, but too frequent
NCOV-003	Service(s) is (are) not covered
AUTH-001	Prior approval is required and was not obtained

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5. Appendices

5.1 References

- https://www.doh.gov.ae/-/media/51BDF280150B4AD481064B8E945BDB1D.ashx
- https://www.isahd.ae/content/docs/Cervical%20Cancer%20Screening%20and%20Diagnosis_U AE%20National%20Guidelines.pdf
- https://www.acog.org/womens-health/faqs/Cervical-Cancer-Screening?utm_source=redirect&utm_medium=web&utm_campaign=otn
- https://www.ascopost.com/issues/august-10-2018/fda-approves-hpv-test/
- https://www.labce.com/spg761630 fda approved hpv tests.aspx

5.2 Revision History

Date	Change(s)
	V2.0
20.12.2024	Content Update
	Template Updated

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