Screening Pap Smears for Early Detection of Cervical/Vaginal Cancer (P3000, P3001, G0123, G0143, G1044, G0145, G0147, G0148, Q0091) – NCD 210.2

Indications:

A screening pap smear and related medically necessary services provided to a woman for the early detection of cervical cancer (including collection of the sample of cells and a physician's interpretation of the test results) and pelvic examination (including clinical breast examination) are covered under Medicare Part B when ordered by a physician (or authorized practitioner).

High risk factors for cervical and vaginal cancer are:

- Early onset of sexual activity (under 16 years of age)
- Multiple sexual partners (five or more in a lifetime)
- History of sexually transmitted disease (including HIV infection)
- Fewer than three negative or any pap smears within the previous seven years; and
- DES (diethylstilbestrol) exposed daughters of women who took DES during pregnancy.

NOTE: Claims for pap smears must indicate the beneficiary's low or high risk status by including the appropriate diagnosis code on the line item (Item 24E of the Form CMS-1500).

Frequency Limitations:

- Annually (or 11 months past the month of the last covered exam) for women at **high risk** for developing cervical or vaginal cancer or childbearing age with abnormal Pap test within the past 3 years
- Every 2 years (or 23 months past the month of the last covered exam) for low-risk women

Note: Medicare coinsurance and Part B deductible are waived for these preventive services.

Most Common Diagnoses for High Risk (which meet medical necessity) *	
Z72.51	High risk heterosexual behavior
Z72.52	High risk homosexual behavior
Z72.53	High risk bisexual behavior
Z77.29	Contact with and (suspected) exposure to hazardous substances
Z77.9	Other contact with and (suspected) exposures hazardous to health
Z91.89	Oher specified personal risk factors, not elsewhere classified
Z92.850	Personal history of Chimeric Antigen Receptor T-cell therapy
Z92.858	Personal history of other cellular therapy
Z92.86	Personal history of gene therapy
Z92.89	Personal history of other medical treatment

Most Common Diagnoses for Low Risk (which meet medical necessity) *		
Z01.411	Encounter for gynecological examination (general) (routine) with abnormal findings	
Z01.419	Encounter for gynecological examination (general) (routine) without abnormal findings	
Z12.4	Encounter for screening for malignant neoplasm of cervix	
Z12.72	Encounter for screening for malignant neoplasm of vagina	
Z12.79	Encounter for screening for malignant neoplasm of other genitourinary organ	
Z12.89	Encounter for screening for malignant neoplasm of other sites	

*See the full list of covered diagnosis codes and claims processing rules (after clicking on the link, download the zip file):

https://www.cms.gov/Medicare/Coverage/DeterminationProcess/downloads/CR12482.zip

For the complete coverage guidelines for NCD 210.2, see the Medicare Coverage Database: <u>Screening Pap Smears for Early Detection of Cervical or Vaginal Cancer</u>

The above CMS guidelines are current as of: 04/01/2025.