

### Who is eligible?

Female members (including members assigned as female at birth) 16–24 years who were identified as being sexually active either through the prescription of contraceptives or via medical coding.

### Why it matters?

Chlamydia is the most commonly reported bacterial sexually transmitted disease in the United States. It occurs most often among adolescent and young adult females. Untreated chlamydia infections can lead to serious and irreversible complications. This includes pelvic inflammatory disease (PID), infertility and increased risk of becoming infected with HIV. Screening is important, as approximately 75% of chlamydia infections in women and 95% of infections in men are asymptomatic. This results in delayed medical care and treatment.<sup>1</sup>

The American Academy of Pediatrics recommends screening for Chlamydia for all sexually active female adolescents and young adults younger than 25 years in age.<sup>2</sup>

### Measurement Description:

The percentage of eligible females who had at least one test for chlamydia during the measurement year.

### Best Practices:

- Consider universal chlamydia screening for all females ages 16–24 years old regardless of risk, especially during any visit where oral contraceptives, sexually transmitted infections (STI), or urinary tract symptoms are discussed.
- Chlamydia screening may not be captured via claims if the service is performed and billed under prenatal and postpartum global billing; provide timely submission of claims with correct service coding and diagnosis.
- Educate minors about their privacy rights under HIPPA, emphasizing parental consent is not required for testing or treatment of STIs.
- Utilize EHR functions that coordinate care between providers (e.g. Epic's Care Everywhere).
- Documentation should specify the chlamydia-screening test date, or date the test was performed, and the test results.

### Contraceptive Medications

Description	Prescription
Contraceptives	<ul style="list-style-type: none"> <li>• Desogestrel-ethinyl estradiol</li> <li>• Dienogest-estradiol (multiphasic)</li> <li>• Drospirenone-ethinyl estradiol</li> <li>• Drospirenone-ethinyl estradiol-levomefolate (biphasic)</li> <li>• Ethinyl estradiol-ethynodiol</li> <li>• Ethinyl estradiol-etonogestrel</li> <li>• Ethinyl estradiol-levonorgestrel</li> <li>• Ethinyl estradiol-norelgestromin</li> <li>• Ethinyl estradiol-norethindrone</li> <li>• Ethinyl estradiol-norgestimate</li> <li>• Ethinyl estradiol-norgestrel</li> <li>• Etonogestrel</li> <li>• Levonorgestrel</li> <li>• Medroxyprogesterone</li> <li>• Mestranol-norethindrone</li> <li>• Norethindrone</li> </ul>
Diaphragm	<ul style="list-style-type: none"> <li>• Diaphragm</li> </ul>
Spermicide	<ul style="list-style-type: none"> <li>• Nonoxynol 9</li> </ul>

**Compliance captured by Chlamydia test codes:**

<b>CPT</b>	87110, 87270, 87320, 87490, 87491, 87492, 87810
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**Codes Establishing sexual activity:**

All codes listed in the Pregnancy and Sexual Activity HEDIS Value Sets.  
The complete Value Set Directory is available for free download [here](#).

-OR-

**Pregnancy Test**

<b>CPT</b>	81025, 84702, 84703
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<sup>1</sup> "Chlamydia Screening in Women (CHL)." National Committee for Quality Assurance, <https://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality-report/chlamydia-screening-chl/>  
<sup>2</sup> "Screening for Nonviral Sexually Transmitted Infections in Adolescents and Young Adults." Pediatrics, vol. 134, no. 1, 2014, p. e302–e311, <https://publications.aap.org/pediatrics/article/134/1/e302/62344/Screening-for-Nonviral-Sexually-Transmitted>