

Provider Education

Chlamydia Screening (CHL)

Did you know?

Chlamydia is the most common bacterial sexually transmitted infection (STI) in the United States.* The best way to detect chlamydia in its early stages is to conduct screenings at annual physicals for sexually active men and women.

When should a chlamydia screening be provided?



Providers should order an annual chlamydia screening for every sexually active male and female patient between the ages of 15 (turn age 16 by December 31 of the measurement year) and 24 who present in the office for or with any of the following:

- Any time a urine screening is performed
- Prior history of a sexually transmitted infection
- Pregnancy testing
- Contraception services
- Annual gynecological exam
- Prior history of sexual abuse or assault

Upon recognizing that a patient is at risk, the provider should offer STI prevention counseling and make a note in the chart to routinely test for chlamydia and other STIs.



Remember to visit Meridian's online Provider Portal to enter relevant Healthcare Effectiveness Data and Information Set (HEDIS®) information. Click here to access the Provider Portal www.provider.ilmeridian.com (Medical record documentation must still be faxed).

Contact your Provider Relations Specialist with any questions or call Meridian at: 866-606-3700.

Fax Medical Records to: 833-702-2523.

*Source: NCQA.org

Meridian covers urine chlamydia screening

Meridian covers all types of chlamydia screenings. This includes traditional methods, as well as urine screening (bill with CPT code 87110) for men and women.

The advantage to urine screening is that it is simple, quick and has a higher accuracy rate than other methods.

CPT Codes♦

87110 (Urinalysis Screening), 87270, 87320, 87490 ,87491, 87492 and 87810

♦ Codes listed are specific to the subject matter of this flyer. While Meridian encourages you to use these codes in association with the subject matter of this flyer, Meridian recognizes that the circumstances around the services provided may not always directly support/match the codes. It is crucial that the medical record documentation describes the services rendered in order to support the medical necessity and use of these codes.

2021 Medicaid P4Q Program Measures

Medicaid	Target 1 Rate	Target 1 Incentive**	Target 2 Rate	Target 2 Incentive**	Target 3 Rate	Target 3 Incentive**
CHL	43.48%	\$10	58.44%	\$15	67.98%	\$20

Chlamydia

Centers for Disease Control and Prevention (CDC) Guidelines

What are the types of chlamydia screenings?

C. trachomatis urogenital infection in women can be diagnosed by testing urine or by collecting swab specimens from the endocervix or vagina. Diagnosis of C. trachomatis urethral infection in men can be made by testing a urethral swab or urine specimen.

Treatment

Treating infected patients prevents sexual transmission of the infection. In addition, treating all sex partners of those testing positive for chlamydia can prevent reinfection of the index patient and infection of other partners. Treating pregnant women usually prevents transmission of C. trachomatis to infants during birth.

Recommended Regimens

Azithromycin 1 g orally in a single dose *OR*

Doxycycline 100 mg orally twice a day for 7 days

Alternative Regimens

Erythromycin base 500 mg orally four times a day for 7 days *OR*

Erythromycin ethylsuccinate 800 mg orally four times a day for 7 days *OR*

Levofloxacin 500 mg orally once daily for 7 days *OR*

Ofloxacin 300 mg orally twice a day for 7 days

Special Considerations

Pregnancy

Recommended Regimens

Azithromycin 1 g orally in a single dose

Alternative Regimens

Amoxicillin 500 mg orally three times a day for 7 days *OR*

Erythromycin base 500 mg orally four times a day for 7 days *OR*

Erythromycin base 250 mg orally four times a day for 14 days *OR*

Erythromycin ethylsuccinate 800 mg orally four times a day for 7 days *OR*

Erythromycin ethylsuccinate 400 mg orally four times a day for 14 days

Follow-up

Except in pregnant women, test of cure (i.e., repeat testing 3-4 weeks after completing therapy) is not advised for persons treated with the recommended or alternative regimens, unless therapeutic compliance is in question, symptoms persist, or reinfection is suspected.

Management of sex partners

Patients should be instructed to refer their sex partners for evaluation, testing, and treatment if they had sexual contact with the patient during the 60 days preceding onset of the patient's symptoms or chlamydia diagnosis.

Source: www.cdc.gov

****Incentive program terms are subject to change at Meridian's discretion. Meridian will notify providers of any changes or incentive program alterations.**