AAVBC
AMERICAN ACADEMY OF VALUE BASED CARE

Colorectal Cancer Screening

Quick Reference Guide

2026

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KEY TAKEAWAYS

STARS PERFORMANCE IMPACT

COL is a HEDIS process measure in the Staying Healthy domain with one of the largest eligible denominators in the Medicare Part C Star Ratings program. A single percentage-point improvement across the eligible population can shift Star Rating projections. Plans achieving 4+ Stars receive a 5% quality bonus payment on their benchmark.

1. **COL is a high-impact Stars measure**

   One of the largest eligible populations in Medicare Advantage; even 1% improvement can shift Star Ratings and unlock Quality Bonus Payments (≥4 Stars = ~5% revenue increase)

2. **Eligible population is broad and growing**

   Adults aged **45–75**, continuously enrolled (≤45-day gap), creating a large numerator–denominator gap and opportunity for improvement

3. **Colonoscopy is the gold standard**

   Only modality that provides **screening, diagnosis, and polypectomy in one step**, preventing cancer rather than just detecting it

4. **Other modalities are two-step pathways**

   FIT, FOBT, stool DNA, sigmoidoscopy, and CT colonography require **follow-up colonoscopy if positive**, introducing risk of delay and care gaps

5. **Closing the gap requires completed screening, not intent**

   Orders, referrals, or Z12.11 coding **do not count**—screening must be **completed and documented** to meet HEDIS numerator criteria

6. **Closed-loop care is essential**

   Every patient must be tracked from **identification → test completion → results → follow-up**, especially after abnormal non-invasive tests

7. **Documentation drives performance**

   The most common failure is **missing or incomplete documentation**, not lack of screening—capture modality, date, and results in structured fields