

# Provider Bulletin

## HEDIS® News You Can Use

### Chlamydia Screening (CHL)



#### Importance of chlamydia screening

Chlamydia is one of the most common sexually transmitted infections (STIs) - and often goes unnoticed because it is frequently asymptomatic. Left untreated, it can lead to serious complications like irreversible damage to reproductive organs. The good news is that it is easily treated and cured with antibiotics.

This bulletin offers information on any measure changes, best practice suggestions, links to codes and free resources.



#### Measure requirements

Persons ages 16-24 identified as sexually active with at least one test for chlamydia in the measurement year.

For more detailed measure info, go to [MC Gap Closure Reference Guide](#)



#### Coding information

Routine screening is essential to stop the spread of infection, catch cases early, and start treatment promptly. Use appropriate coding to ensure compliance and quality reporting.

For up-to-date, measure specific codes to use, go to [MC Gap Closure Reference Guide](#)



#### Common reasons for Gaps in Care

1. Low perceived risk, stigma, reluctance to provide sexual history.
2. Workflow gaps, screening not discussed or offered.

For members assigned but choosing not to establish care, go to [MC PCP Change Request Form](#)



## Member approach

The **opt-out strategy** is a public health approach designed to increase chlamydia screening rates, particularly among young women, by making screening **a routine part of care** – unless the patient specifically declines [1, 2].

The opt-out strategy:

1. Normalizes screening as routine care.
2. Provides a default approach: screening is a part of care unless declined.
3. Reduces embarrassment and stigma.
4. Improved opportunity for early detection.



## Great resources

1. [National Chlamydia Coalition](#)

[Chlamydia opt-out-screening](#)

2. [CDC STI Treatment Guidelines](#)

**Thank you for the care you provide  
to our members**



## Best Practices

### Tips to improve results

1. **Use electronic medical record (EMR) prompts:** Embed reminders in the EMR for sexual health history and screening.
2. **Ensure confidential care:** Protect patient privacy, especially for adolescents.
3. **Screen all under 25:** Test all sexually active women and those prescribed contraceptives – whether or not they verbally confirm sexual activity.
4. **Provide education:** Explain why screening matters and normalize conversations about sexual health.
5. **Engage positively:** Normalize testing as routine care using affirming language. Example: *“We recommend chlamydia testing for everyone your age. Let’s do your test today.”*