

190.2 - Diagnostic Pap Smears

(Rev. 48, Issued: 03-17-06; Effective/Implementation Dates: 06-19-06)

CIM 50-20, CIM 50-20.1

A diagnostic pap smear and related medically necessary services are covered under Medicare Part B when ordered by a physician under one of the following conditions:

- Previous cancer of the cervix, uterus, or vagina that has been or is presently being treated;
- Previous abnormal pap smear;
- Any abnormal findings of the vagina, cervix, uterus, ovaries, or adnexa;
- Any significant complaint by the patient referable to the female reproductive system; or
- Any signs or symptoms that might in the physician's judgment reasonably be related to a gynecologic disorder.

Screening Pap Smears and Pelvic Examinations for Early Detection of Cervical or Vaginal Cancer. *(See section 210.2.)*