

# Chlamydia Screening

Chlamydia is the most common sexually transmitted bacterial infection (STI) in the United States. **Iowa ranks 27th in the United States for reported rates of chlamydia with 14,633 reported cases in 2022. The reported rate doesn't necessarily reflect all chlamydia cases.** The best way to detect chlamydia in its early stages is to conduct screenings at yearly physicals for patients who are sexually active.



## When should I provide a chlamydia screening?

Providers should order an annual chlamydia screening for female patients between the ages of 15 (who turn age 16 by December 31 of the measurement year) and 24 who are present in the office for any of the following reasons:

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

Tell your patient this is a routine urine test. If they ask for more information, please provide it. Do not give them reasons to refuse the test. Upon recognizing 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.



## What types of chlamydia screening does Iowa Total Care cover?

Iowa Total Care covers some types of chlamydia screenings. Please check with your Iowa Total Care provider relations representative for details.

Iowa Total Care does cover traditional screening methods, as well as urine screening (simply bill with CPT code 87110). The advantage to urine screening is that it is quick and simple with less discomfort than other methods.

CPT Codes\* - 87110 (urinalysis screening): 87270, 87320, 87490, 87491, 87492, 87810

*\*females only*



## How can I conduct a chlamydia screening?

*A. C. trachomatis urogenital infection* in women can be diagnosed by first-catch urine or by collecting swab specimens from the endocervix or vagina.



## What does treatment prevent?

Treating infected patients prevents sexual transmission of the infection. In addition, treating all sexual partners of those testing positive for chlamydia can prevent reinfection.





## What are the recommended regimens?

The medications on the preferred drug list for Iowa Medicaid are:

- Doxycycline (monohydrate) caps 100 mg (preferred in nonpregnant individuals).
- Azithromycin powder pack for suspension 1 gram (preferred in pregnancy).
- Azithromycin tabs 250 mg and 500 mg (preferred in pregnancy).

Refer to [UpToDate.com](https://www.upToDate.com) for information on medication regimes and indications for treatment for pregnant individuals, as pregnancy requires special consideration.



## Do I 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 regimens, unless therapeutic compliance is in question, symptoms persist, or reinfection is suspected.



## Does the patient refer sexual partners?

Patients should be instructed to refer their sexual 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.

### Consider using the CDC Expedited Partner Therapy (EPT) Program.

The CDC recommends using the Expedited Partner Therapy (EPT) Program to prevent the spread of chlamydia to other partners or from going back and forth between partners. Providers can write prescriptions for partners without examining the partner. If the name of the partner is unknown, the prescription can be written for Expedited Partner Therapy. The partner is responsible for the payment of the medication or will have to use their personal prescription drug coverage.

## Resources

- Iowa HHS STI Program: [hhs.iowa.gov/public-health/sexually-transmitted-infections/sti-program](https://hhs.iowa.gov/public-health/sexually-transmitted-infections/sti-program).
- Iowa Total Care Provider Resources: [iowatotalcare.com/providers/resources/forms-resources.html](https://iowatotalcare.com/providers/resources/forms-resources.html).
- U.S. Preventive Services Task Force Chlamydia and Gonorrhea Screening: [uspreventiveservicestaskforce.org/uspstf/recommendation/chlamydia-and-gonorrhea-screening](https://uspreventiveservicestaskforce.org/uspstf/recommendation/chlamydia-and-gonorrhea-screening).
- CDC Chlamydia Information: [cdc.gov/std/treatment-guidelines/chlamydia.htm](https://cdc.gov/std/treatment-guidelines/chlamydia.htm).
- CDC Expedited Partner Therapy: [cdc.gov/std/ept/default.htm](https://cdc.gov/std/ept/default.htm).
- Iowa Code 2024, Section 139A.35 - Minors: [legis.iowa.gov/docs/ico/section/139A.35.pdf](https://legis.iowa.gov/docs/ico/section/139A.35.pdf).
- Information on medication treatment regimens: [UpToDate.com](https://www.upToDate.com).

If you have questions about this bulletin or any other provider resources, please contact:

- Provider Services: **1-833-404-1061 (TTY: 711)**.
- Pharmacy Services: **1-888-996-0082**.

