

Breast Cancer Screening (BCS)

By working together, we can improve health outcomes for your patients, our members. The Healthcare Effectiveness Data and Information Set (HEDIS®) helps us measure many aspects of performance. This tip sheet provides key details of the HEDIS measure for breast cancer screening (BCS).

What Is the Measure?

The measure focuses on mammograms to screen for breast cancer in women who are 50 to 74 years old. Appropriate screenings include one or more mammograms (screening, diagnostic, film, and digital or digital breast tomosynthesis) on or between October 1, two years prior to the measurement year, through December 31 of the measurement year.

How to Improve Your Score

- Discuss the importance of breast cancer screening and ensure your patients are up to date with their annual mammogram.
- Document the screening for breast cancer in the medical record. The medical record must indicate specific date and result of the screening.
- Document medical and surgical history of the breast in the medical record, include dates.
- MRIs, ultrasounds, and/or biopsies **do not count** in this measure. Although these procedures may be indicated for evaluating women at higher risk for breast cancer or for diagnostic purposes, they are performed as an adjunct to mammography and do not alone count towards the HEDIS care gap compliance.
- Submit the medically appropriate diagnosis and procedure codes for the services rendered.
- Submit claims and encounter data in a timely manner.
- Follow up with each patient once mammogram is ordered to confirm the member has completed the screening imaging requested.

Codes

CPT for mammograms: 77061-77063, 77065-77067

Exclusions

1. Bilateral mastectomy anytime during the member's history
Any of these meet criteria for bilateral mastectomy:
 - Bilateral mastectomy
 - **ICD-10 PCS:** 0HTV0ZZ

Continued next page

All summaries of the measures contained herein are reproduced with permission from HEDIS Volume 1: Technical Specifications for Health Plans by the National Committee for Quality Assurance (NCQA). HEDIS® is a registered trademark of the NCQA. Please see the final page of this document for the full copyright citation.

Florida Blue is an independent licensee of the Blue Cross and Blue Shield Association.

99364 0324R

Exclusions (continued)

- Unilateral mastectomy **with** a bilateral modifier (same procedure)
 - **CPT:** 19180, 19200, 19220, 19240, 19303, 19304, 19305, 19306, 19307
 - **Modifier:** 50
- History of bilateral mastectomy
 - **ICD-10:** Z90.13

Any combination of codes below that indicate a mastectomy **on both the left and right side** on the same or different dates of service

- **Left mastectomy** (any of the following)
 - Unilateral mastectomy with a left-side modifier (same procedure)
 - **CPT:** 19180, 19200, 19220, 19240, 19303-19307
 - **Modifier:** LT
 - Absence of the left breast
 - **ICD-10:** Z90.12
 - Left unilateral mastectomy
 - **ICD-10 PCS:** 0HTU0ZZ
 - **Right mastectomy** (any of the following)
 - Unilateral mastectomy with a right-side modifier (same procedure)
 - **CPT:** 19180, 19200, 19220, 19240, 19303-19307
 - **Modifier:** RT
 - Absence of the right breast
 - **ICD-10:** Z90.11
 - Right unilateral mastectomy
 - **ICD-10 PCS:** 0HTT0ZZ
2. Hospice care or using hospice services during the measurement year
 - **HCPCS:** G0182, G9473-G9479, Q5003-Q5008, Q5010, S9126, T2042-T2046
 - **CPT:** 99377-99378
 3. Members receiving palliative care during the measurement year
 - **HCPCS:** G9054, M1017
 4. Members who are 66 and older as of December 31 of the measurement year, with frailty and advanced illness; members must meet **both** frailty and advanced illness criteria to be excluded
 5. Members who died anytime during the measurement year

Content reproduced with permission from HEDIS[®] MY2024, Volume 1: Technical Specifications for Health Plans by the National Committee for Quality Assurance (NCQA). HEDIS measures and specifications are not clinical guidelines and do not establish a standard of medical care. NCQA makes no representations, warranties, or endorsement about the quality of any organization or physician that uses or reports performance measures and NCQA has no liability to anyone who relies on such measures or specifications. Limited proprietary coding sets are contained in the specifications for convenience, and users should obtain all necessary licenses from the owners of the code sets. NCQA disclaims all liability for use or accuracy of any coding contained in the specifications. To purchase copies of the publication, including the full measures and specifications, visit [NCQA.org/Publications](https://www.ncqa.org/Publications).