

Proposed Changes to Existing Measure for HEDIS^{®1} 2009: Breast Cancer Screening (BCS)

NCQA seeks comments on the proposed modification to add Diagnostic Mammography codes to the *Breast Cancer Screening* measure.

The measure is currently designed as a primary prevention measure that assesses the percentage of women 40–69 years of age who had a mammogram to screen for breast cancer during the measurement year or the year prior to the measurement year. In order to be considered numerator compliant, the measure requires women to have had a screening mammogram and does not currently allow biopsies, breast ultrasounds or other diagnostic mammograms for compliance.

In the past, NCQA's Advisory Panels have contended that diagnostic mammography is not a first-line screening method to detect for breast cancer in this age group, according to guidelines, and should not be included in the measure. Part of the rationale for nonallowance has been that if a woman was to detect a change in her breast through self-examination, which led her straight to a diagnostic test, counting the test would lead to overreporting of appropriate first-line screening.

Over time, NCQA has increasingly received comments related to nonallowance of diagnostic mammography in the *Breast Cancer Screening* measure. Criticism is that there are women for whom diagnostic mammography is considered first-line screening; that is, women at higher risk for breast cancer (e.g., those with a family history of the disease, previous breast cancer diagnoses, implants). Feedback from plans and clinicians indicates that the measure, as specified, underreports women who have truly been appropriately screened with diagnostic mammography in these specific cases.

Given this feedback, our staff recently performed a thorough review of the current clinical guidelines and found that overall guidelines support (albeit in a limited fashion) diagnostic mammography as appropriate first-line screening for certain women.

Given this, NCQA proposes the addition of Diagnostic Mammography codes to the measure for numerator compliance. An alternative proposal for consideration that would not penalize plans and also would not count diagnostic mammography as numerator compliant would be to exclude those women who have had diagnostic mammography from the denominator. NCQA appreciates your comments and feedback relative to these proposed options.

Included is a copy of the draft specifications with the proposed addition of diagnostic mammography codes for numerator compliance.

NCQA thanks and acknowledges the contributions of the Breast and Cervical Cancer Subgroup.

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Breast Cancer Screening (BCS)

SUMMARY OF CHANGES TO HEDIS 2009

- Added [HCPCS](#) codes [G0204](#) and [G0206](#) to Table BCS-A.
- Added [UB-04](#) code [0401](#) to Table BCS-A.

Description

The percentage of women 40–69 years of age who had a mammogram to screen for breast cancer.

Eligible Population

| | |
|------------------------------|--|
| Product lines | Commercial, Medicaid, Medicare (report each product line separately). |
| Ages | Women 42–69 years as of December 31 of the measurement year. Report two age stratifications and a total rate. <ul style="list-style-type: none"> • 42–51 years • 52–69 years • Total <p>The total rate is the sum of the two numerators divided by the sum of the two denominators.</p> |
| Continuous enrollment | The measurement year and the year prior to the measurement year. |
| Allowable gap | No more than one gap in enrollment of up to 45 days during each year of continuous enrollment. To determine continuous enrollment for a Medicaid beneficiary for whom enrollment is verified monthly, the member may not have more than a 1-month gap in coverage during each year of continuous enrollment. |
| Anchor date | December 31 of the measurement year. |
| Benefit | Medical. |
| Event/diagnosis | None. |

Administrative Specification

| | |
|--------------------|--|
| Denominator | The eligible population. |
| Numerator | One or more mammograms during the measurement year or the year prior to the measurement year. A woman had a mammogram if a submitted claim/encounter contains any one of the codes in Table BCS-A. |

Table BCS-A: Codes to Identify Breast Cancer Screening

| CPT | HCPCS | ICD-9-CM Diagnosis | ICD-9-CM Procedure | UB Revenue |
|---------------------------------|------------------------------------|--------------------|--------------------|--------------------|
| 76083, 76090-76092, 77055-77057 | G0202, <u>G0204</u> , <u>G0206</u> | V76.11, V76.12 | 87.36, 87.37 | <u>0401</u> , 0403 |

Exclusion (optional)

The organization may exclude women who had a bilateral mastectomy. Look for evidence of a bilateral mastectomy as far back as possible in the member's history through December 31 of the measurement year. Exclude members for whom there is evidence of two separate mastectomies. Refer to Table BCS-B for codes to identify exclusions.

Table BCS-B: Codes to Identify Exclusions

| Description | CPT | ICD-9-CM Procedure |
|--|--|----------------------------|
| Bilateral mastectomy | 19180, 19200, 19220, 19240, 19303-19307 <i>WITH</i> Modifier .50 or modifier code 09950* | 85.42, 85.44, 85.46, 85.48 |
| Unilateral mastectomy (members must have 2 separate occurrences on 2 different dates of service) | 19180, 19200, 19220, 19240, 19303-19307 | 85.41, 85.43, 85.45, 85.47 |

*.50 and 09950 modifier codes indicate the procedure was bilateral and performed during the same operative session.

Note

- Do not count biopsies, breast ultrasounds or other diagnostic mammograms for this measure because they are not appropriate methods for primary breast cancer screening.

Data Elements for Reporting

Organizations that submit HEDIS data to NCQA must provide the following data elements.

Table BCS-1/2/3: Data Elements for Breast Cancer Screening

| | Administrative |
|--|--|
| Measurement year | ✓ |
| Data collection methodology (Administrative) | ✓ |
| Eligible population | <i>For each age stratification and total</i> |
| Numerator events by administrative data | <i>For each age stratification and total</i> |
| Reported rate | <i>For each age stratification and total</i> |
| Lower 95% confidence interval | <i>For each age stratification and total</i> |
| Upper 95% confidence interval | <i>For each age stratification and total</i> |

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