2021 MCAS MEASURE: BREAST CANCER SCREENING (BCS)

Measure Steward: National Committee for Quality Assurance (NCQA)

Gold Coast Health Plan’s (GCHP) goal is to help its providers gain compliance with their annual Managed Care Accountability Set (MCAS) scores by providing guidance and resources. This tip sheet will provide the key components to the MCAS measure, “Breast Cancer Screening (BCS).”

Measure Description: This measures the percentage of women ages 50 to 74 who had a mammogram to screen for breast cancer anytime on or between October 1 two years prior to the measurement year through December 31 of the measurement year.

Data Collection Method: Administrative

BCS Clinical Code Set

For billing, reimbursement, and reporting of services completed, submit claims timely with the appropriate medical codes for all clinical conditions evaluated and services completed.

Codes used to identify mammograms (includes screening diagnostic, film, digital, or digital breast tomosynthesis).

<table>
<thead>
<tr>
<th>Description</th>
<th>CPT</th>
<th>HCPCS</th>
<th>LOINC</th>
<th>SNOMED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mammograms</td>
<td>77055-77057, 77061-77063, 77065-77067</td>
<td>G0202, G0204, G0206</td>
<td>24604-1, 24605-8, 24606-6, 24610-8, 26175-0, 26176-8, 26177-6, 26287-3, 26289-9, 26291-5, 26346-7, 26347-5, 26348-3, 26349-1, 26350-9, 26351-7, 26359-2, 26625-2, 26626-0, 26627-8, 26642-7, 26662-9, 37005-6, 37006-4, 37016-3, 37017-1, 37028-8, 37029-6, 37030-4, 37037-9, 37038-7, 37052-8, 37053-6, 37539-4, 37542-8, 37543-6, 37551-9, 37552-5, 37553-5, 37554-3, 37768-9, 37769-7, 37770-5, 37771-3, 37772-1, 37773-9, 37774-7, 37775-4, 38070-9, 38071-7, 38072-5, 38090-7, 38091-5, 38807-4, 38820-7, 38854-6, 38855-3, 42415-0, 42416-8, 46335-6, 46336-4, 46337-2, 46338-0, 46339-8, 46350-5, 46351-3, 46356-2, 46380-2, 48475-8, 48492-3, 69150-1, 69251-7, 69259-0</td>
<td>12389009, 24623002, 43204002, 71651007, 241055006, 241057003, 241058008, 258172002, 439324009, 450566007, 709657006, 723778004, 723779007, 723780005, 726551006, 384151000119104, 392521000119107, 392531000119105, 566571000119105, 572701000119102</td>
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</tbody>
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Note: Magnetic resonance imaging, ultrasounds and biopsies do not count as screening for breast cancer since these screenings are performed as an adjunct to mammography.

Medical exclusions that do not meet the intent of the measure are:

- Bilateral mastectomy.
- Unilateral mastectomy with a bilateral modifier.
- Two unilateral mastectomies with service dates 14 days or more apart.
- History of bilateral mastectomy.
- Any combination of codes that indicate a mastectomy on both the left and right side on the same or different dates of service.

Exclusion Criteria – Members with any of the following conditions are excluded from the BCS measure:

- A bilateral mastectomy any time during the member’s medical history through Dec. 31, 2020 (see Mastectomy Codes table).
- Members receiving hospice care during the measurement year.
- Members receiving palliative care during the measurement year.
- Members 66 years of age and older as of Dec. 31, 2020 who were diagnosed with frailty and advanced illness.
### Mastectomy Codes

<table>
<thead>
<tr>
<th>Description</th>
<th>ICD-10-CM</th>
<th>ICD-10-PCS</th>
<th>ICD-9-PCS</th>
<th>CPT</th>
<th>CPT Modifier</th>
<th>SNOMED</th>
<th>SNOMED Modifier</th>
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<tbody>
<tr>
<td>Bilateral Mastectomy</td>
<td>OHTVOZZ</td>
<td>85.42, 85.44, 85.46, 85.48</td>
<td>-50</td>
<td></td>
<td></td>
<td>14693006, 14714006, 17086001, 22418005, 27865001, 52314009, 60633004, 76468001, 456903003, 726636007</td>
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<tr>
<td>Unilateral Mastectomy with Bilateral Modifier</td>
<td></td>
<td>19180, 19200, 19220, 19240, 19303, 19304, 19305, 19306, 19307</td>
<td>-50 -RT -LT</td>
<td>66398006, 70183006, 172043006, 237637009, 237638004, 274957008, 287653007, 287654001, 318190001, 359728003, 359731002, 359734005, 359740003, 384723003, 395702000, 406505007, 428564008, 446109005, 446420001, 447135002, 447421006</td>
<td>51440002, 7771000, 24028007</td>
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<tr>
<td>Right Unilateral Mastectomy</td>
<td>OHTTOZZ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>429400009, 726430006, 726434002, 726436000, 741010006, 741019007, 451201000124106</td>
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<tr>
<td>Left Unilateral Mastectomy</td>
<td>OHTUOZZ</td>
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<td></td>
<td></td>
<td></td>
<td>428571003, 726429001, 726435001, 726437009, 741009001, 741018004, 451211000124109</td>
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<tr>
<td>Absence of Right Breast</td>
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<td></td>
<td></td>
<td></td>
<td>429242008, 137681000119108</td>
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<td>Absence of Left Breast</td>
<td>Z90.12</td>
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<td>429009003, 137671000119105</td>
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<tr>
<td>History of Bilateral Mastectomy</td>
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<td>428529004, 136071000119101</td>
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Best Practices:

► Use the Inovalon® INDICES® Provider Insights Dashboards to identify members with gaps in care.
► Make outreach calls and/or send letters to advise members of the need for a visit. Ensure that outreach methods include educational information.
► Schedule mammogram screenings for your female patients ages 50 to 74 who have not had a mammogram screening since October 1 (two years prior).
► Encourage testing by educating your patients on the importance of early detection at every point of contact. This includes during clinic visits, telehealth or phone calls and outreach methods.
► Document and code screening mammograms and mastectomies (bilateral or unilateral) on claims / encounter data in a timely manner.
► Note: Mammograms do not require prior authorization. Provide the member with a list of nearby contracted imaging / mammography centers.
► Assist members by scheduling an appointment, whenever possible, to increase probability of compliance.

1 Measures reported using the administrative data collection method report on the entire eligible population and use only administrative data sources (e.g. claims, encounter, lab, immunization registries) to evaluate if services were performed.