

## 2020 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<sup>1</sup>

### Codes used to identify mammograms.

Description	CPT	HCPCS	LOINC	SNOMED
Mammography (Includes screening, diagnostic, film, digital or digital breast tomosynthesis)	77055, 77056, 77057, 77061, 77062, 77063, 77065, 77066, 77067	G0202, G0204, G0206	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, 36319-2, 36625-2, 36626-0, 36627-8, 36642-7, 36962-9, 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, 37552-7, 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	12389009, 24623002, 43204002, 71651007, 241055006, 241057003, 241058008, 258172002, 439324009, 450566007, 709657006, 723778004, 723779007, 723780005, 726551006, 384151000119104, 392521000119107, 392531000119105, 566571000119105, 572701000119102

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.

### Codes used to identify exclusions.

Description	ICD-10-CM	ICD-10-PCS	ICD-9-PCS	CPT	CPT Modifiers	SNOMED Modifiers	SNOMED
Bilateral Mastectomy		OHTVOZZ	85.42, 85.44, 85.46, 85.48				14693006, 14714006, 17086001, 22418005, 27865001, 52314009, 60633004, 76468001, 56903003, 726636007



Description	ICD-10-CM	ICD-10-PCS	ICD-9-PCS	CPT	CPT Modifiers	SNOMED Modifiers	SNOMED
Unilateral Mastectomy with Modifiers				19180, 19200, 19220, 19240, 19303, 19304, 19305, 19306, 19307	-50 (Bilateral) -RT -LT		
Right Unilateral Mastectomy		OHTT0ZZ					429400009, 726430006, 726434002, 726436000, 741010006, 741019007, 451201000124106
Left Unilateral Mastectomy		OHTU0ZZ					428571003, 726429001, 726435001, 726437009, 741009001, 741018004, 451211000124109
Absence of Right Breast	Z90.11						429242008, 137681000119108
Absence of Left Breast	Z90.12						429009003, 137671000119105
History of Bilateral Mastectomy	Z90.13						428529004, 136071000119101

**Best Practices:**

- ▶ Use the GCHP Performance Feedback Report to identify members with gaps in care.
- ▶ Make outreach calls and/or send letters to advise members of the need for a visit.
- ▶ 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 and educate your patients on the importance of early detection.
- ▶ 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.
- ▶ Ensure your documentation is clear and concise.
- ▶ Use proper coding.

<sup>1</sup> 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.