Breast Cancer Screening (BCS-E)

Description of Measure

The percentage of members 40-74 years of age who were recommended for routine breast cancer screening and had a mammogram to screen for breast cancer.¹

To satisfy the measure, the patient must have one of more mammograms (screening, diagnostic, and film, digital or digital breast tomosynthesis) between October 1, two years prior(PY) and December 31, MY. If one breast has been removed and the other is present, a screening or initial diagnostic mammography is required for the remaining breast.

Documentation

Bilateral or unilateral mammogram reports are acceptable such as:

- Screening or Diagnostic mammogram.
- Digital mammogram or digital breast tomosynthesis

Documentation can include the following and results are not required.

- Notation of a completed mammogram with DOS as part of the medical history. Health Maintenance or preventive care sections are considered 'history" sections.
- Transgender members (female to male) are eligible for BCS reporting.
- Member reported completed mammogram with DOS.

Exclusion Codes

Code	Definition
Z90.11	Acquired absence of right breast
Z90.12	Acquired absence of left breast
Z90.13	Acquired absence of bilateral breast
F64.1	Dual role transvestism
F64.2	Gender identity disorder of childhood
F64.8	Other gender identity disorders
F64.9	Gender identity disorder, unspecified
Z87.890	Personal history of sex reassignment
CPT 19318	Members who had gender-affirming chest surgery with a diagnosis of gender dysphoria
	(Gender Dysphoria Value Set) any time during the member's history through the end of the
	measurement period.



Exclusions

Exclusions	Timef	rame
 Members who use or elect to use hospice services Member who died Members receiving palliative care 	Any time during MY	
Members 66 years of age and older by Dec. 31 MY with Advanced Illness and Frailty. Members must meet BOTH frailty and advanced illness criteria to be excluded.	 Frailty diagnosis on 2 differe Advanced Illness: Either of the MY or PY Advanced illness diagner Dispensed a dementia Dementia Med Description Cholinesterase inhibitors Misc. CNS Agents Dementia combinations 	ne following during
Bilateral Mastectomy History of bilateral mastectomy Unilateral mastectomy with a bilateral modifier	Anytime in a member's history through Dec. 31, MY	
Members who had gender-affirming chest surgery with a diagnosis of dysphoria.	Anytime in a member's history	through Dec. 31, MY

Strategies for success

- Scheduling a mammogram appointment for your patient.
- Mobile Mammography units are available throughout the state that visit rural Arkansas locations. UAMS,
 Baxter Health, Mercy, and St. Bernard's are a few hospital systems that offer mobile mammography clinics and scheduling.
- *ARHOME members can earn \$50 in Blue Wellness Rewards for completing a mammogram every 2 years. Visit BlueWellnessRewards.Healthmine.com and register or login or call 800-800-4298 to sign up with a customer service representative to see what rewards are recommended.
- Use Annual Wellness Visits to schedule screenings.
- Add screenings to your annual assessment form and/or EMR template.
- Address mammography at every visit, even when patient has refused.
- Provide a list of locations and phone numbers where mammogram services can be performed.
- Send reminder letters to patients signed by the provider.
- Establish a system to for telephone reminder calls.
- Establish a system for mailed reminders.
- Document medical and surgical history in the medical record with dates.
- Code for exclusions, such as history of mastectomy.

- Educate women regarding the benefit of early detection of breast cancer through routine mammograms.
 - Mammograms are the most effective method for detecting breast cancer in the early stages when it is most treatable.
 - Many women with breast cancer do not have symptoms, which underscores the importance of regular breast cancer screening.
 - The recommended frequency of routine mammograms is at least once every 24 months for all women aged 50 -74. Depending on risk factors, mammograms may be done more frequently.
- MRI's, ultrasounds, 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 compliance.

Resources

I.	National Committee for Quality Assurance, HEDIS® Measurement Year 2025 Volume 2 Technical Specifications
	for Health Plans

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