

HEDIS® Tip Sheet

Breast Cancer Screening (BCS-E)

Measure Description

The percentage of members 50–74 years of age who were recommended for a routine breast cancer screening and had a mammogram to screen for breast cancer between October 1 two years prior to the measurement year through December 31 of the measurement year (e.g., between 10/1/23 and 12/31/25 [MY 25]).

Product Lines: Commercial, Medicaid, Medicare, Exchange

☆ Medicare Star Measure Weight: 1

Codes Included in the Current HEDIS® Measure

Description	Code
Mammography	CPT: 77061-77063, 77065-77067

Measure Common Exclusions

Description	Code
Absence of Left Breast	ICD-10: Z90.12
Absence of Right Breast	ICD-10: Z90.11
Bilateral Mastectomy	ICD-10: OHTV0ZZ
History of Bilateral Mastectomy	ICD-10: Z90.13
Unilateral Mastectomy	CPT: 19180, 19200, 19220, 19240, 19303-19307
Unilateral Mastectomy Left	ICD-10: OHTU0ZZ
Unilateral Mastectomy Right	ICD-10: OHTT0ZZ

Ways Providers can Improve HEDIS® Performance

- Utilize standing mammogram orders for patients within the appropriate age range and contact patient with the information.
- Educate patients about the importance of early detection and encourage testing. Patients should schedule well in advance to ensure that a mammogram can be completed by the end of the measurement year.
- Document a bilateral mastectomy in the medical record and fax Molina Healthcare the chart.
- Schedule a mammogram for a patient or send/give member a referral/script (if needed).
- Discuss possible fears the patient may have about mammograms and inform women that currently available testing methods are less uncomfortable and require less radiation.
- Follow-up on outstanding orders when no report has been received.
- When documenting a patient's reported mammogram, when available, always include a date of service.
- Instruct coders to add relevant mastectomy history codes (listed above) to claims to alleviate the need to submit medical records.
- Upload medical record that contains mammograms (e.g., patient history extracts) in Availity HEDIS Portlet, Cozeva, fax, etc. to close a data gap if the patient reports having a mammogram.

Ways Health Plans can Improve HEDIS® Performance

- Educate members about the importance of early detection and encourage testing.
- Use needed services list to identify members in need of mammograms.
- Create a list of mammogram facilities to share with members.
- Identify and educate top 10 providers with open gaps.
- Develop relationships with mammogram facilities and establish value-based arrangement.
- Share list of needed services with mammogram centers for members who have historical claims at that facility Review BCS rates stratified by race, ethnicity, geography, provider group, etc. to identify underserved, isolated, or any other population needing additional support.
- Launch geographically, language, and culturally sensitive member educational campaigns of the importance of screening.

Please note that the HEDIS measurement looks at members 50–74 years of age, but “The U.S. Preventive Services Task Force recommends screening women 40–74 years of age for breast cancer every 2 years.”

Reference: U.S. Preventive Services Task Force. 2024. “Screening for Breast Cancer: U.S. Preventive Services Task Force Recommendation Statement. *American Medical Association* 331(22):1918-1930.

Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement period.
- Members who die any time during the measurement period.
- Members who had a bilateral mastectomy or both right and left unilateral mastectomies any time during the member’s history through the end of the measurement period. **Any** of the following meets the criteria for bilateral mastectomy:
 - Bilateral mastectomy.
 - Unilateral mastectomy with a bilateral modifier (CPT Modifier code 50).
 - Unilateral mastectomy found in clinical data with a bilateral modifier (SNOMED CT Modifier code 51440002). *Note: The “clinical” mastectomy value sets identify mastectomy; the word “clinical” refers to the data source, not to the type of mastectomy.*
 - History of bilateral mastectomy.
 - Any combination of codes from the table below that would indicate a mastectomy on **both** the left **and** right side on the same or different dates of service.
- Members who had gender-affirming chest surgery (CPT code 19318) with a diagnosis of gender dysphoria any time during the member’s history through the end of the measurement period.
- Medicare members 66 years of age and older by the end of the measurement period who meet either of the following:
 - Enrolled in an Institutional SNP (I-SNP) any time during the measurement period.
 - Living long-term in an institution at any time during the measurement period, as identified by the LTI flag in the monthly membership detail data file. Use the run date of the file to determine if a member had an LTI flag during the measurement period.
- Members 66 years of age and older by the end of the measurement period, with frailty and advanced illness. Members must meet **both** of the following frailty and advanced illness criteria to be excluded:
 - Frailty. At least two indications of frailty (Frailty Device Value Set; Frailty Diagnosis Value Set; Frailty Encounter Value Set; Frailty Symptom Value Set) with different dates of service during the measurement period. Do not include laboratory claims (POS: 81).
Advanced Illness. Either of the following during the measurement period or the year prior to the measurement period: (a) Advanced illness on at least two different dates of service. Do not include laboratory claims (POS: 81); (b) Dispensed dementia medication.
- Members that are receiving palliative care at any time during the measurement period.



- Members who had an encounter for palliative care (ICD-10-CM code Z51.5) any time during the measurement period. Do not include laboratory claims (POS: 81).

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