

Breast Cancer Screening (2011)

Benchmark to qualify for bonus payments: At least 52.0% of women between 40 and 69 years of age had a mammogram to screen for breast cancer in the measurement year or the year prior to the measurement year.

Measurement Period: Calendar year 2010 and 2011.

Qualifying Service: CPT Codes 77055, 77056, 77057 (previous codes: 76083, 76090, 76091, 76992) or HCPCS- G0202; G0204 and G0206

Diagnosis codes: 87.36, 87.37, V76.11, V76.12

UB-92 Revenue code 0401, 0403

Note: Does not include biopsies, breast ultrasounds or other diagnostic mammograms for this measure because they are not appropriate methods for primary breast cancer screening.

Qualifying Patient: Women on the PCP's Illinois Health Connect panel roster as of December 1, 2011 between the ages of 42 and 69 as of December 31 of measurement year.

Exclusions: Women who have had a bilateral mastectomy during the measurement year, or members with evidence of two separate mastectomies are excluded.

Codes to Identify Exclusions:

Description	CPT	ICD-9-CM Procedure
Bilateral Mastectomy	19303.50 –19307.50 or (19303-19307 with modifier code 09950*) <i>19180, 19200, 19220, 19240</i>	85.42, 85.44, 85.46, 85.48
Unilateral Mastectomy (members must have 2 separate occurrences on 2 different dates of service)	19303-19307 <i>19180, 19200, 19220, 19240</i>	85.41, 85.43, 85.45, 85.47
<p><i>NOTE: The following codes became obsolete as of 1/1/07 and are not HFS billable: 19180.50 or (19180 with modifier code 09950*) 19200.50 or (19200 with modifier code 09950*) 19220.50 or (19220 with modifier code 09950*) 19240.50 or (19240 with modifier code 09950*)</i></p>		

Reference: <http://www.uspreventiveservicestaskforce.org/uspstf/uspsbrca.htm>