

**PATIENT POPULATION:** Members 40-74 years of age

**NUMERATOR COMPLIANCE:** Members 40-74 years of age who had a mammogram to screen for breast cancer every two years.

## EXCLUSIONS

- » Members who had a bilateral mastectomy; or who have a history of a bilateral mastectomy; or for whom there is evidence of a right and a left unilateral mastectomy
- » See HEDIS®<sup>1</sup> specification for further exclusions

## DOCUMENTATION REQUIREMENTS

A note in the medical record indicating the date **and** result of the breast cancer screening

- » Compliant **screening types** include: screening, diagnostic, film, digital or digital breast tomosynthesis (3D) mammography
- » **Result/Findings:** Documentation of “normal” or “abnormal” is acceptable
- » Can be **patient reported** with date, type of test, **and** result/finding
- » **Do not count** biopsies, breast ultrasounds, or MRIs
- » Documentation can be completed during **telehealth encounter**

## COMMON DOCUMENTATION INSUFFICIENCIES

- » Utilizing patient questionnaires that do not capture type of screening; or patient does not provide complete information
- » Failing to document findings/results i.e., “mammo 10/2022”

## BEST PRACTICES

- 1** On annual wellness visit forms, include breast cancer screening question – with screening type, date (month/year), and findings (including patient name and date of birth).
- 2** If a patient received a wellness evaluation within the last year, **Z-code Z12.31 (Encounter for screening mammogram)** may be used in place of a follow-up appointment. The patient can call the rendering provider to request an order and go straight to diagnostic imaging for a screening.
- 3** Upload mammography reports into your EMR and label clearly for easy identification.
- 4** Set reminders for providers of when a patient’s next screening is due and to discuss with patients in advance.
- 5** Make follow-up phone calls if patients have not completed their screening. Utilize care gap lists to identify non-compliant patients.
- 6** Educate patients on the risks of breast cancer.
- 7** Our care coordination team can provide patients with individualized support. To refer a patient please contact us: