

Breast Cancer Screening (BCS-E)

Patients 40–74 years of age who had a mammogram to screen for breast cancer any time on or between October 1 two years prior to the measurement period and the last day of the measurement period.

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.

Relevant Codes

The following codes may support gap closure through claims. Compliance depends on meeting HEDIS-defined criteria, including timing, documentation, and qualifying services—not code submission alone.

Code	Description
19303	Unilateral Mastectomy
77062	Breast Tomosynthesis BI
77063	Breast Tomosynthesis BI
77065	DX MAMMO INCL CAD UNI
77066	DX MAMMO INCL CAD BI
77067	SCR MAMMO BI INCL CAD
G9899	Ages 40-74 every 27 months (Medicare only)
G9708	Bilateral mastectomy or evidence of a right and a left unilateral mastectomy (Medicare only)

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.
- Do not count biopsies, breast ultrasounds, or MRIs.
- Documentation can be completed during telehealth encounters.
- Mammography report may be provided by the patient for clinician review during the visit and should be documented in the medical record.

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

- On annual wellness visit forms, include breast cancer screening questions with screening type, date (month/year), and findings (including patient name and date of birth).
- 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.
- Upload mammography reports into your EMR and label clearly for easy identification.
- Set reminders for providers when a patient’s next screening is due and discuss with patients in advance.
- Make follow-up phone calls if patients have not completed their screening. Utilize care gap lists to identify non-compliant patients.
- Educate patients on the risks of breast cancer.