



**BlueCross BlueShield**  
of Montana



**QUALITY CARE**

## Breast Cancer Screening

We collect data from providers to measure and improve the quality of care our members receive. Breast Cancer Screening is one aspect of care we measure in our quality programs. Quality measures evaluate a prior calendar year performance.

### What We Measure

We capture screening mammograms for women ages 50 to 74. Appropriate screenings include one or more mammograms (screening, diagnostic, film and digital, or digital breast tomosynthesis) on or between Oct. 1 two years before the measurement year and Dec. 31 of the measurement year.

This measure is a Healthcare Effectiveness Data and Information Set (HEDIS®) measure. See the [National Committee for Quality Assurance website](#) for more details.

### Why It Matters

Except for some forms of skin cancer, breast cancer is the most common cancer among women in the U.S., regardless of race or ethnicity. Screening can improve outcomes. **Early detection reduces the risk of dying from breast cancer** and can lead to a greater range of treatment options and lower health care costs.

## Eligible Population

Women ages 50-74 as of Dec. 31 of the measurement year are included in this measure.

**Exclusion:** Members who meet any of the following criteria are excluded:

- Had a bilateral mastectomy anytime in their history before Dec. 31 of the measurement year
- Were in hospice care during the measurement year
- Were ages 66 and older as of Dec. 31 of the measurement year, with frailty and advanced illness. Members must meet both frailty and advanced illness criteria to be excluded.

## Tips to Consider

- Discuss the importance of breast cancer screenings and ensure members are up-to-date with their annual mammogram.
- Document screenings in the medical record. Indicate the specific date and result of the screening.
- Document medical and surgical history in the medical record, including dates.
- MRIs, ultrasounds and biopsies don't 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 don't alone count toward the compliance.
- Use correct diagnosis and procedure codes.
- Submit claims and encounter data in a timely manner.

## How to Document

This measure's data is tracked through claims data only. Hybrid chart review doesn't apply.

For more information, see [NCQA's HEDIS Measures and Technical Resources](#).



### Questions?

Contact your Network Representative.



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