HEDIS 2015 - Breast Cancer Screening (BCS)

The percentage of women 50–74 years of age who had a mammogram to screen for breast cancer.

Improvement Notation	Higher score indicates better quality
Denominator	Women 52–74 years as of the last day of the measurement year.
Numerator	One or more mammograms (Mammography Value Set) any time on or between 15 months prior to the measurement year and the last day of the measurement year.
Exclusions	Bilateral mastectomy any time during the member's history through the last day of the measurement year.
Exceptions	None
Note	

Last updated 01/13/2017

Reference Periods Reference Date 02/12/2017

Base Period	02/12/2016 - 02/12/2017	12 months prior to the reference date
Ever	- 02/12/2017	Any time prior to the reference date
Reporting Period Screen	11/12/2014 - 02/12/2017	15 months prior to start date of **Base Period**

Denominator

○ Between 52 and 74 years of age on end date of **Base Period** — 02/12/2017

AND

○ Gender is Female

Numerator

○ One code indicating the following for `Reporting Period Screen` — between 11/12/2014 and 02/12/2017

✔ mammography   **See table N1**

Numerator

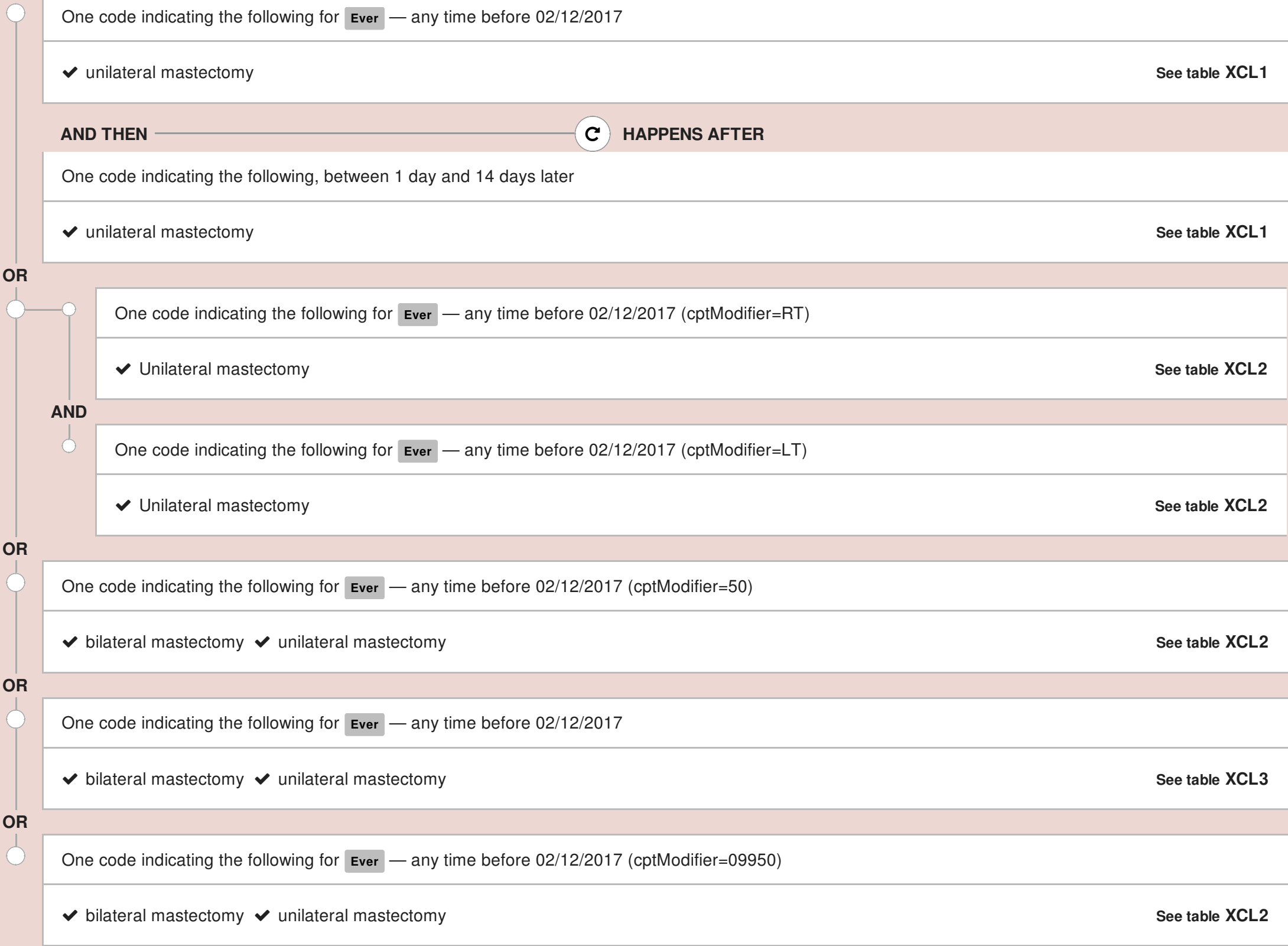○ One code indicating the following for `Reporting Period Screen` — between 11/12/2014 and 02/12/2017

✔ mammography   **See table N1**

Exclusion

One code indicating the following for **Ever** — any time before 02/12/2017

✔ unilateral mastectomy   **See table XCL1**

AND THEN ───────────── ⟳ **HAPPENS AFTER**

One code indicating the following, between 1 day and 14 days later

✔ unilateral mastectomy   **See table XCL1**

OR

One code indicating the following for **Ever** — any time before 02/12/2017 (cptModifier=RT)

✔ Unilateral mastectomy   **See table XCL2**

AND

One code indicating the following for **Ever** — any time before 02/12/2017 (cptModifier=LT)

✔ Unilateral mastectomy   **See table XCL2**

OR

One code indicating the following for **Ever** — any time before 02/12/2017 (cptModifier=50)

✔ bilateral mastectomy   ✔ unilateral mastectomy   **See table XCL2**

OR

One code indicating the following for **Ever** — any time before 02/12/2017

✔ bilateral mastectomy   ✔ unilateral mastectomy   **See table XCL3**

OR

One code indicating the following for **Ever** — any time before 02/12/2017 (cptModifier=09950)

✔ bilateral mastectomy   ✔ unilateral mastectomy   **See table XCL2**

Reference Tables

Denominator Reference Tables

Numerator Reference Tables

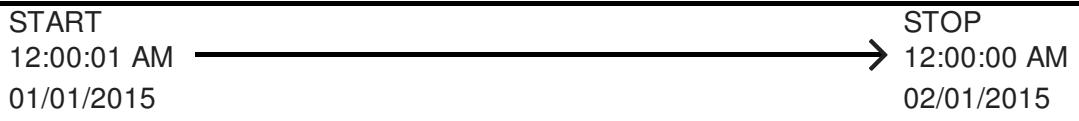| N1	✔ mammography		
	Procedure		
	CPT	**HCPCS**	**ICD-9**
	77055, 77056, 77057	G0202, G0204, G0206	87.36, 87.37

Exclusions Reference Tables

XCL1	✔ unilateral mastectomy
	Diagnosis
	Procedure
	CPT
	19180, 19200, 19220, 19240, 19303, 19304, 19305, 19306, 19307

XCL2	✔ Unilateral mastectomy
	Procedure
	CPT
	19180, 19200, 19220, 19240, 19303, 19304, 19305, 19306, 19307

XCL3	✔ bilateral mastectomy ✔ unilateral mastectomy
	Procedure
	ICD-9
	85.42, 85.44, 85.46, 85.48

Reference Periods

START
12:00:01 AM
01/01/2015
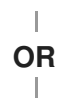
⟶

STOP
12:00:00 AM
02/01/2015

Different criteria in each measure require that records occur during a precise time period. Note that all dates begin at midnight.

Operators

Operators describe what criteria is needed for a measure. They include:

AND

Both criteria above and below the line must be met

OR

Either criteria above or below the line must be met

NONE OF THE FOLLOWING

The criteria following this are negated — they must not have occurred

Expressions

You will encounter certain expressions that denote a specific relationship between criteria. They include:

Linked Encounter
Indicates that the criteria listed above must have occurred during the same encounter as the criteria that immediately follows

AND THEN ⟲ **HAPPENS AFTER**

Indicates that the criteria must have occurred in a certain sequence. The criteria that follows must have occurred after the criteria listed above

AND THEN ⟳ **HAPPENED PREVIOUSLY**

Reverse sequence — the criteria that follows must have occurred before the criteria listed above

PLUS ⊕ **COUNT INSTANCES**

The first criteria specifies what must be on the patient record. The criteria below is then counted for that patient