

2025 Star Measure Tips



One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

Breast Cancer Screening (BCS-E)

Electronic Clinical Data Systems (ECDS) Measure

Measure description

The percentage of patients who were recommended for and then screened for breast cancer.

Measure population (denominator)

Patients ages 40–74 during the measurement year.

Measure compliance (numerator)

Mammogram screening (bilateral or unilateral) performed any time on or between October 1 two years prior to the measurement year and December 31 of the measurement year, as evidenced by the following:

- Documentation indicating a mammogram was completed and the date it was performed.

Note: A breast thermogram **does not** meet criteria for this measure.

Exclusions

- History of mastectomy on both the left and right side on the same or different dates of service (if exact date is unknown, the year is acceptable)
- Gender-affirming chest surgery (CPT code 19318) AND a diagnosis of gender dysphoria any time during the patient's history
- Received hospice services anytime during the measurement year
- Received palliative care during the measurement year
- Deceased during the measurement year
- Are age 66 and older with advanced illness and frailty (for additional definition information, see the *Advanced Illness and Frailty Guide*)

Did you know?

- Many patients with breast cancer do not have symptoms, which is why regular breast cancer screenings are so important.
- Breast cancer detection at an early stage has a 93% or higher survival rate.
- The accuracy of mammography improves as individuals age.

continued

Helpful HEDIS hints

- Review completed screening dates with patients at all visits, including virtual care.
- Obtain dated mammogram reports.
- Follow up on outstanding orders when no report has been received.
- Patient reported mammogram is acceptable. Document date in the history or preventive service section of the medical record.
- If the exact date of the last mammogram is unknown, avoid using words such as “approximate” or “about” when documenting. Instead, document the month/year or year alone.
- Create a standing order to mail to patient for mammography.
- Provide a list of locations where mammogram screenings can be performed.
- Depending on risk factors, mammograms may need to be done more frequently.

Tips for coding

If the patient met exclusion criteria, include the following ICD-10-CM diagnosis codes on the claim as appropriate:

ICD-10-CM code	Description
Z90.11*	Acquired absence of right breast and nipple
Z90.12*	Acquired absence of left breast and nipple
Z90.13	Acquired absence of bilateral breasts and nipples
F64.1	Dual role transvestism
F64.2	Gender identity disorder of childhood
F64.8	Other gender identity disorders
F64.9	Gender identity disorder, unspecified
Z87.890	Personal history of sex reassignment

* Both Z90.11 and Z90.12 need to be billed on the same or different dates of service to be excluded

Note: This measure is being collected and reported through electronic clinical data systems (ECDS). ECDS is defined as a health plan that utilizes a network of interoperable data systems to better communicate member health information across various health care service providers.

Resources

1. American Cancer Society. 2023. “American Cancer Society Recommendations for the Early Detection of Breast Cancer.” www.cancer.org/cancer/breast-cancer/screening-tests-and-early-detection/american-cancer-society-recommendations-for-the-early-detection-of-breast-cancer.html
2. American Cancer Society. 2019. “Frequently Asked Questions About the American Cancer Society’s Breast Cancer Screening Guideline.” <https://www.cancer.org/cancer/breast-cancer/frequently-asked-questions-about-the-american-cancer-society-new-breast-cancer-screening-guideline.html>

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