



IMPROVING HEALTH CARE QUALITY

Breast Cancer Screening

Blue Cross and Blue Shield of Illinois (BCBSIL) collects data from our providers to measure and improve the quality of care our members receive. Breast cancer screening (BCS) is one aspect of care we measure in our quality programs.*

What We Measure

To evaluate the level of care our members receive regarding BCS, 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.

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

Why It Matters

Except for some forms of skin cancer, breast cancer is the most common cancer among American women, 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.

Exclusions: 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 dispensed dementia medication
- 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.

Ways to Improve

- 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

BCS 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 BCBSIL Provider Network Consultant.



* Quality measures evaluate a prior calendar year performance. Measure specifications are from the National Quality Forum (NQF) and/or National Committee for Quality Assurance (NCQA).

The above material is for informational purposes only and is not a substitute for the independent medical judgment of a physician or other health care provider. Physicians and other health care providers are encouraged to use their own medical judgment based upon all available information and the condition of the patient in determining the appropriate course of treatment. The fact that a service or treatment is described in this material is not a guarantee that the service or treatment is a covered benefit and members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions. Regardless of benefits, the final decision about any service or treatment is between the member and their health care provider.

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

242354.0321