



HEDIS[®] Lunch and Learn

October 2021

Breast and Cervical Cancer Screening

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Breast and Cervical Cancer Screening

HEDIS[®]

News You can Use



Lunch and Learns will reinforce and elaborate on HEDIS News You Can Use information

Monthly Webinars: 30 minutes, 1 HEDIS topic



Breast Cancer Screening (BCS)



Breast Cancer Screening (BCS)

Who is in the measure?

- **Females aged 52 – 74 as of 12/31**
- **Continuous Enrollment** - October 1 two years prior to the measurement year through December 31 of the measurement year
 - Matches the numerator lookback period (unlike CCS)

What makes the member compliant?

- **Ages 50 – 74 (on the date of service)**
- **One mammogram** any time on or between October 1 two years prior to the measurement year and December 31 of the measurement year
 - Screening, diagnostic, film, digital, digital breast tomosynthesis DO count
 - MRIs, ultrasounds or biopsies DO NOT alone count, as they are performed as an adjunct to mammography.

*** CODING IS CRITICAL!**



**Administrative
Methodology**

**No chart
review**

Breast Cancer Screening - **EXCLUSIONS**

- **Women who have claims history of mastectomy are excluded from the Breast Cancer Screening measure:**
 - **Bilateral Mastectomy**
- Or
- **Two unilateral mastectomies**

**Can be
ANYTIME
in the
member's
history
through
December
31.**

Breast Cancer Screening- Coding

Coding – CRITICAL to compliance!

Mammogram Codes

CPT: 77061-77063, 77065-77067

HCPCS: G0202, G0204, G0206

Mastectomy Codes

CPT: 19180, 19200, 19220, 19240, 19303- 19307

ICD-10 PCS: OHTVOZZ, OHTUOZZ, OHTTOZZ

ICD-10 CM: Z90.11-Z90.13



Gaps in Care

Challenges

Why Gaps in Care?



- **Coding/Billing**
- **No mammogram at all**
- **Mammogram not performed in lookback period** (Oct 1 two years prior to MY through Dec 31 of MY)
- **ABHWV not aware/no claim of Mastectomy** (Bilateral or two unilateral)
- **No chart reviewed allowed!**



- **Busy schedules**
- **Sick or problem-based care thinking**
- **Cancer won't happen**
- **Anxiety that test will be painful**
- **Taking care of family/ others versus self, less priority on self-care**



- **Members usually go to another provider or facility to have a mammogram performed**
- **Transportation/access to mammography, especially very rural areas**
- **SSI population = lower compliance rates**
- **Poor access to mammography services in rural areas.**

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Take-Aways

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Take-away Actions - BCS

Accurate Coding

Increases compliance

Includes Acquired Absence

Review GYN/
Mammography history
every visit

Maximize opportunities

Order/schedule mammogram if needed

Assess PCP vs GYN

Member may not have a GYN to order mammogram

Assess transportation circumstances

Promote Bonnie's Bus schedule

Well-woman Events

Partner with ABHWV to hold well-woman events (\$25 member gift card)

Remind members they can't care for others

Without taking care of self!

Contact members on GIC report

Schedule upon reaching

Consider proactive mammogram outreach and scheduling

(Before GIC exists)

Cervical Cancer Screening (CCS)

Cervical Cancer Screening (CCS)

Chart Review measure

Who is in the measure (denominator)?

- Females aged 24-64 as of 12/31
- Continuous enrollment = the measurement year

What makes the member compliant (numerator)?

- **Ages 21-64 (on the date of service)**
 - Cervical cytology during the measurement year or 2 years prior
- **Ages 30-64 (on the date of service)**
 - Cervical cytology + hrHPV co-testing during the measurement year or 4 years prior
 - Cervical hrHPV testing during the measurement year or 4 years prior

***Biopsies do not count because they are not valid for primary cervical cancer screening.**



1.
★
Radical
Hysterectomy

2.
★
Complete
Hysterectomy

.....
★
3. Total Hysterectomy
(abdominal, vaginal)
.....

4.
Hysterectomy
documentation
+ provider
notation that
member no
longer needs
pap test

5.
Hysterectomy
documentation
+ vaginal pap
smear
documentation

Cervical Cancer Screening - Exclusions

History of hysterectomy with no residual cervix

Women who have medical record documentation or claims history of **complete, total, or radical hysterectomy are excluded.**

- Exclusion can be found **ANY TIME** in the member's history
- **Documentation MUST be specific.**
 - **Always** document type of hysterectomy. If the member has had a total, complete or radical hysterectomy, but documentation does not support (or no claim), the member will remain non-compliant!
 - **Documentation of “Hysterectomy” alone will not meet exclusion criteria,** as it does not indicate the cervix was removed

Cervical Cancer Screening (CCS) - Coding

Cervical Cytology Codes

CPT: 88141-88143, 88147, 88148, 88150, 8815288154, 88164-88167, 88174, 88175

HCPCS: G0123, G0124, G0141, G0143-G0145, G0147, G0148, P3000, P3001, Q0091

hrHPV Test

CPT: 87624, 87625

HCPCS: G0476

Hysterectomy/Cervical Agenesis codes CPT:

51925, 56308, 57540, 57545, 57550, 57555, 57556, 58150, 58152, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290-58294, 58548, 58550, 58552-58554, 58570-58573, 58575, 58951, 58953, 58954, 58956, 59135

ICD-10 CM: Q51.5, Z90.710, Z90.712 (Acquired Absence of Cervix)

ICD-10 PCS: OUTC0ZZ, OUTC4ZZ, OUTC7ZZ, OUTC8ZZ

Additional Codes Effective 2022

Hysterectomy/Cervical Agenesis codes

CPT: 58541-58544, 59525

ICD-10 PCS: OUT90ZL, OUT90ZZ, OUT94ZL, OUT94ZZ

Hysterectomy With No Residual Cervix

ICD9PCS: 68.41, 68.49, 68.51, 68.59, 68.6, 68.69, 68.71, 68.79, 68.8

CPT: 57530, 57531

****LOINCs available by contacting QM.**



Gaps in Care

CCS Challenges

Why Gaps in Care?



- **Coding/billing**
- **No pap test at all in last 3 years – ALL CCS women**
- **No pap/HPV at all in last 5 years – 30-64 yr**
- **ABHWV not aware of paps before the continuous enrollment period – mismatch**
- **ABHWV not aware of Total Hysterectomy**



- **Busy schedules**
- **Sick or problem-based care thinking**
- **Anxiety that test will be painful**
- **Cancer won't happen**
- **Taking care of family/ others, less priority on self-care**
- **Member deferring pap during well exams**



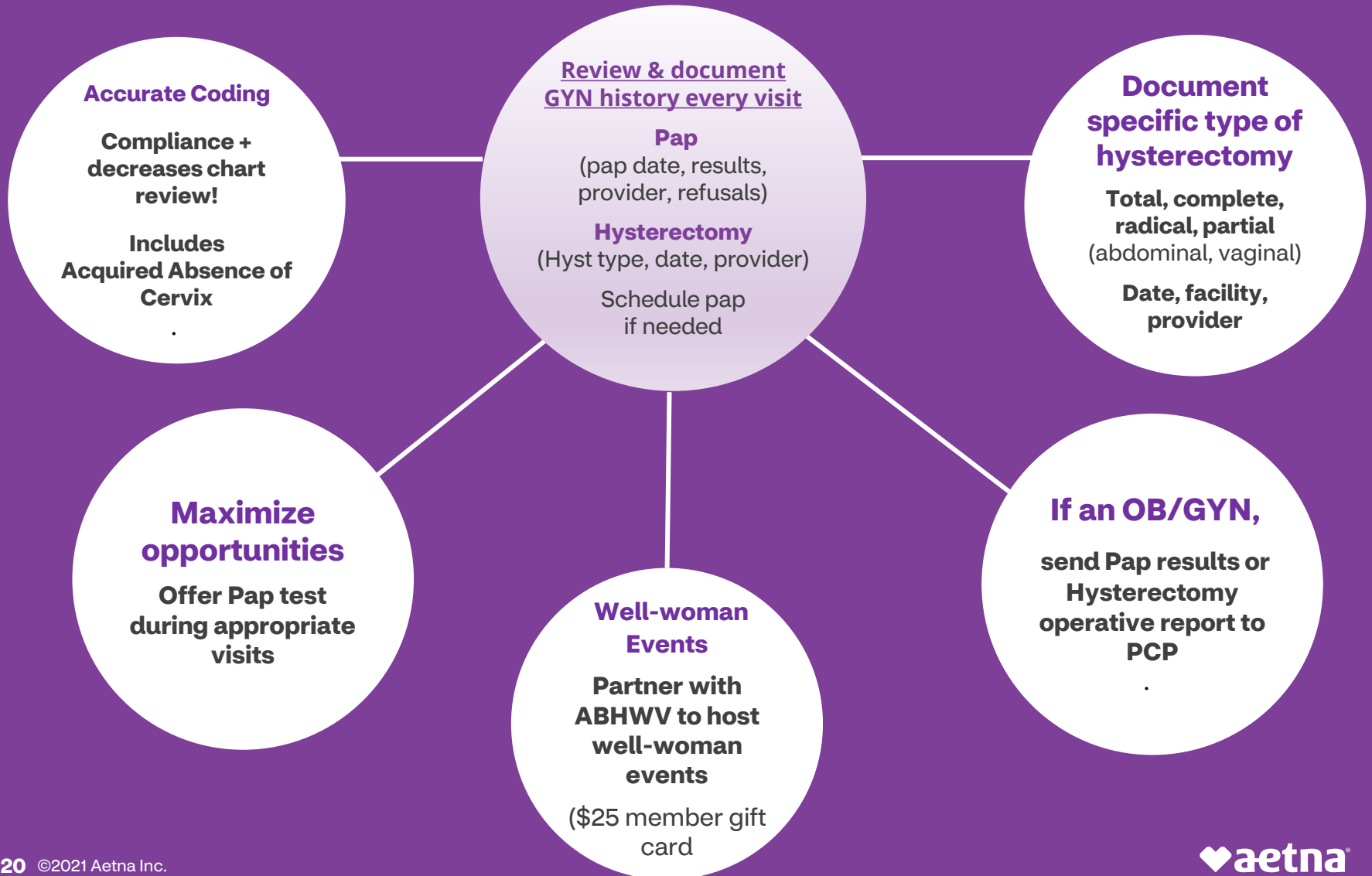
- **Missing or incomplete pap test history documentation in medical record**
- **Missing or unspecific Hysterectomy documentation**
- **Pap results from other practices, OB/GYN or HDs not in PCP chart**

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Take-Aways

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Take-Away Actions- CCS



Take-Away Actions- CCS



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Questions?
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ABHWV website

NEW Provider HEDIS Section

There is now a HEDIS tab within the Provider Tab on the ABHWV website. The following are now available:

1. **What is HEDIS?** – a short description of HEDIS
2. **HEDIS News You Can Use** –emailed to providers each month and will be available on the website, including current and prior months
3. **HEDIS Toolkit For Provider Offices** – comprehensive document of all HEDIS measures, including a coding/billing section. This is updated annually or sooner as needed.
4. **HEDIS Lunch and Learn Webinars For Providers** – monthly webinars such as the one today. Links for past webinars and invite information for the next upcoming Lunch and Learn will be here.

<https://www.aetnabetterhealth.com/westvirginia/providers/hedis>

Closing Thoughts and Resources

Members trust you!

Patients consider you their most trusted source of medical information.

Your guidance and encouragement is critical in their health management.

Allow time for discussion and questions. Hearing your answers can help patients feel more confident and comfortable.

ABHWV Quality Partnerships

Sherry Griffith, ABHWV Quality HEDIS Project Manager

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EMR data file transfer options

Tosha Morris

MorrisT5@aetna.com

304-348-2003

Well-Woman Event Partnering

David Roberts

robertsj13@aetna.com

304-539-9046

Other Resources

Bonnie's Bus

Bonnie's Bus may give members a mammogram option closer to where they live

Provide phone#, schedule and/or website to members

Remember Bonnie's bus requires physician order

<https://calendar.wvu.edu/site/wvucancerinstitute/?view=list2&search=y>

**Thank You for
making a
difference!**



