



HEDIS[®] Lunch and Learn

October 2022

Breast and Cervical Cancer Screening



Sherry Griffith RN, BSN CCM

Breast Cancer Screening (BCS)



Breast Cancer Screening (BCS)

Who is in the measure?

- **Females aged 52 –74 as of 12/31 of the MY**
- **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 or more mammograms** 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.

**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 (Acquired Absence of the Breast)



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 by NQQA during HEDIS medical record review season!**



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



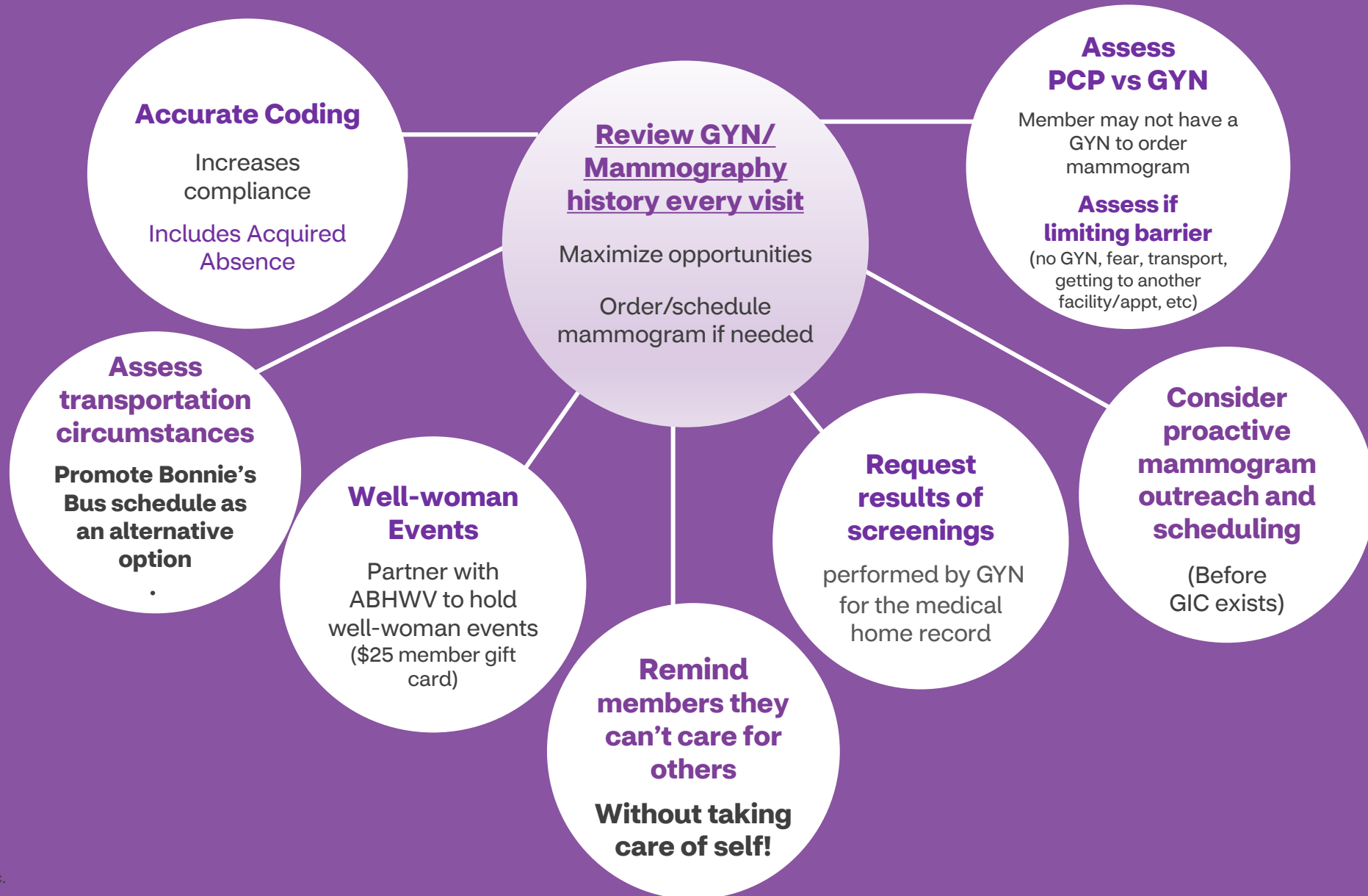
- **Members usually go to another provider or facility to have a mammogram performed**
- **Transportation/access to mammography, especially very rural areas**
- **SSI population = lower compliance rates**
- **GYN versus PCP**

—

Take-Aways

—

Take-away Actions - BCS



Cervical Cancer Screening (CCS)

Cervical Cancer Screening (CCS)

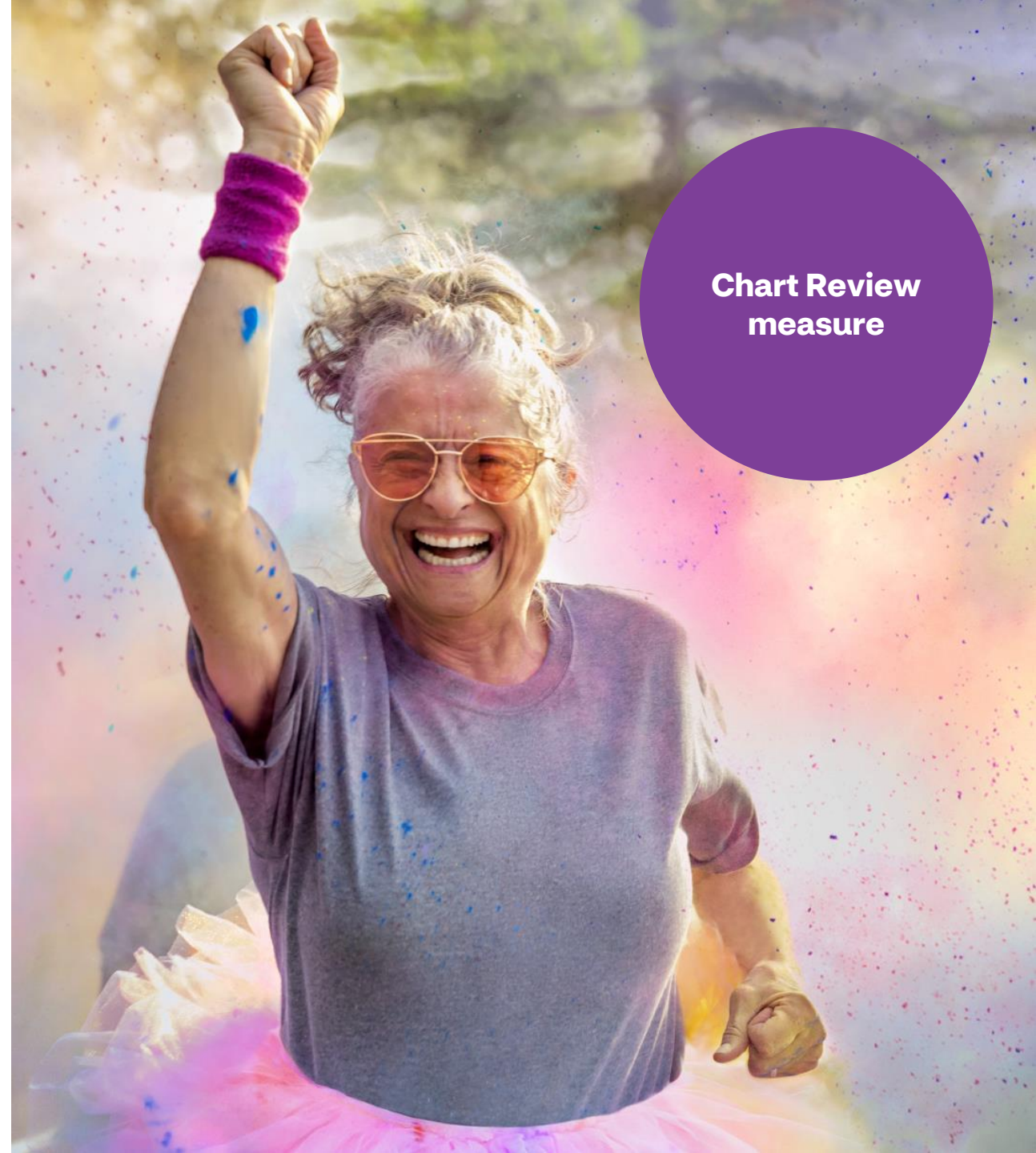
Who is in the measure (denominator)?

- Females aged 24-64 as of 12/31 of the measurement year (MY)
- Continuous enrollment = the MY (*does NOT match lookback period*)

What makes the member compliant (numerator)?

- Women 21-64 who were screened for cervical cancer using any of the following criteria:
 - Age 21-64 (on the date of service) - Cervical cytology performed within the last 3 years (MY or 2 years prior)
 - Age 30-64 (on the date of service)- Cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years (MY or 4 years prior)
 - Age 30-64 (on the date of service) - Cervical cytology/ high-risk human papillomavirus (hrHPV) co-testing performed within the last five years (MY or 4 years prior)

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



**Chart Review
measure**

★ **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 prior to 12/31
- **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, 88152-88153, 88164-88167, 88174, 88175

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

hrHPV Test

CPT: 87624, 87625

HCPCS: G0476

LOINCs and Hysterectomy/Cervical Agenesis codes available by contacting QM at ABHVVHEDIS@aetna.com



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



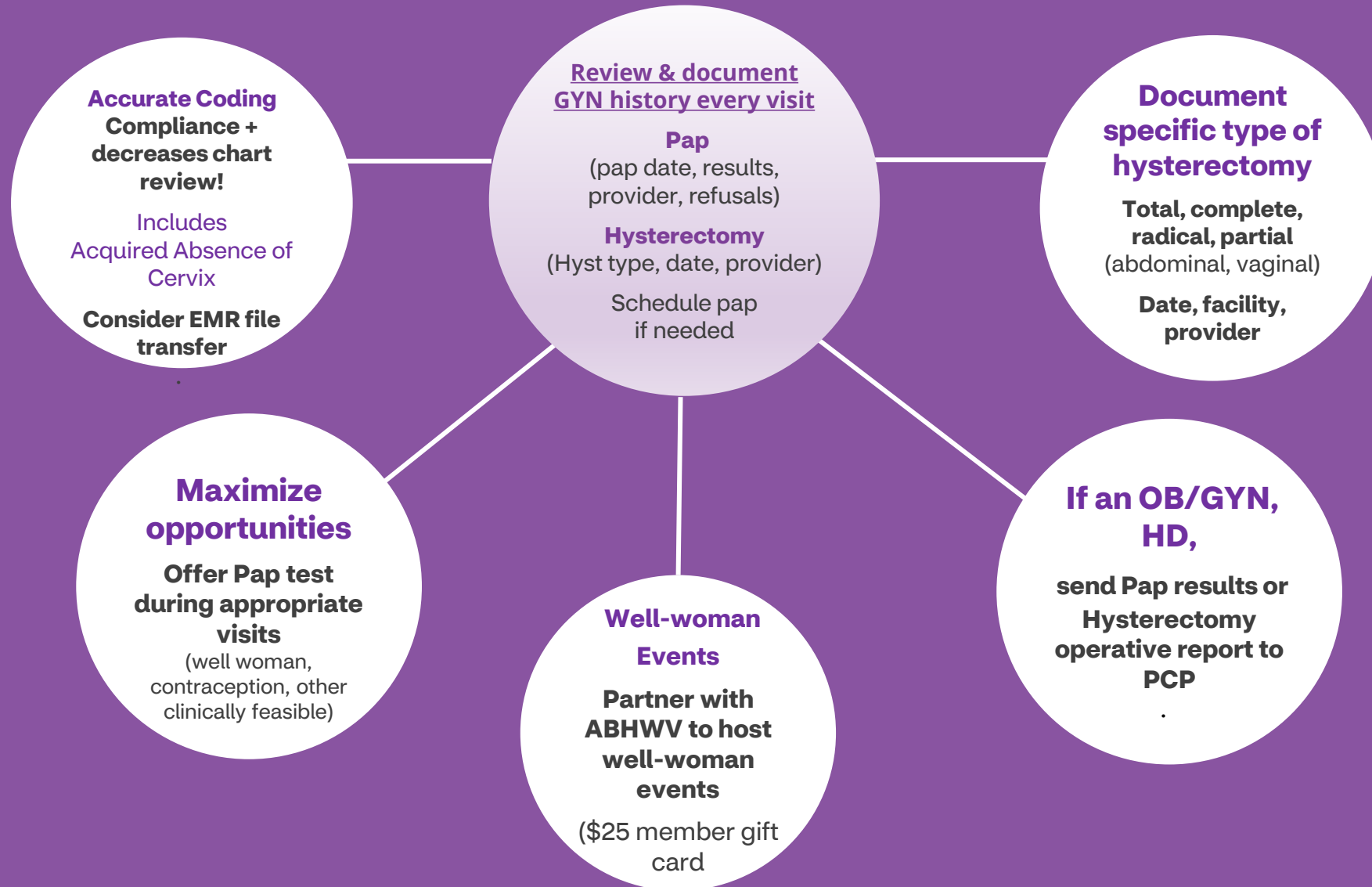
- Missing or incomplete pap test history documentation in medical record
- Missing or unspecific Hysterectomy documentation
- Pap results from other practices, OB/GYN or HDs not in PCP chart
- SSI and ACA= lower compliance rates

—

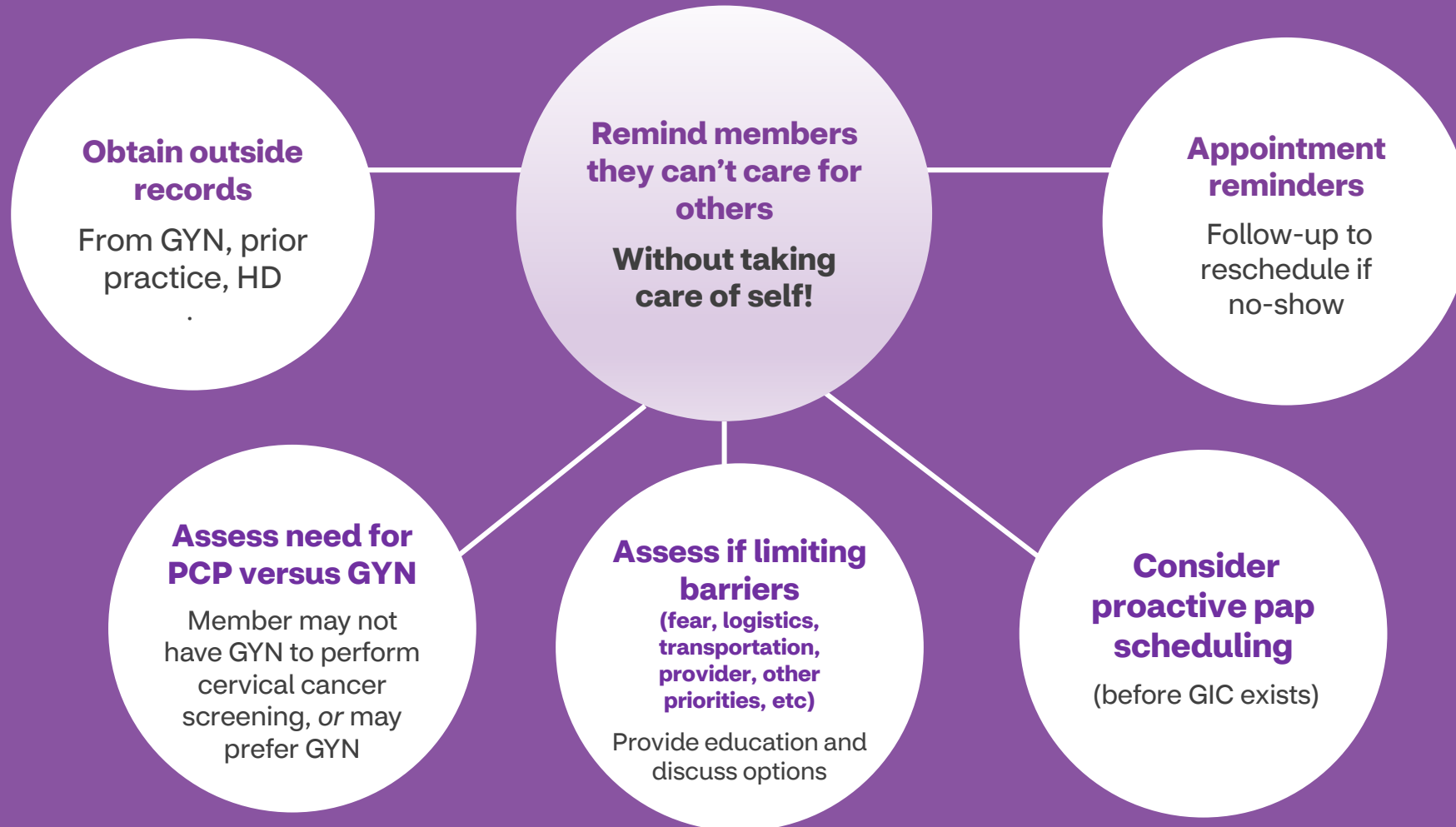
Take-Aways

—

Take-Away Actions- CCS



Take-Away Actions- CCS



—
Questions?
—

ABHWV website HEDIS Section

NEW Provider

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.html>

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

Melani McNinch, Senior Mgr, ABHWV Quality HEDIS Manager

• ABHWVHEDIS@aetna.com

Sherry Griffith, ABHWV Quality HEDIS Project Manager

ABHWVHEDIS@aetna.com

EMR data file transfer options

Tosha Morris

ABHWVHEDIS@aetna.com

304-348-2003

Wellness Event Partnering

David Roberts

ABHWVHEDIS@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

Bonnie's bus link:

https://cal.wvu.edu/Bonnies_Bus

**Thank You for
making a
difference!**

