



## **Breast Cancer Screening Tip Sheet**

### **What is the CMS Star Rating Program?**

CMS uses a five-star quality rating system to measure the experiences Medicare beneficiaries have with their health plan and healthcare system – the Star Rating Program. Health plans are rated on a scale of 1 to 5 stars, with 5 being the highest. These ratings are then published on the Medicare Plan Finder at [medicare.gov](http://medicare.gov) to raise the quality of care for Medicare beneficiaries, strengthen beneficiary protections and help consumers compare health plans more easily.

### **Measure Description**

**Weight: 1**

This measure shows the percent of female plan members aged 52-74 who had a mammogram during the past two years.

### **Measure Source**

- Claims.

### **Stars/Quality Specifications**

The percentage of women enrollees 50 to 74 years of age who had a mammogram to screen for breast cancer in the past two years. One or more mammograms any time on or between October 1<sup>st</sup> two years prior to the measurement year and December 31<sup>st</sup> of the measurement year.

### **Best Practice/Call to Action**

- Ensure tests and exclusionary data are documented for patient.
- Recommend needed test and prevention.

### **Coding and Documentation Tips**

Exclusions may apply if:

- Patient had bilateral mastectomy.
- Patient is in hospice or palliative care during measurement year.

Member may be excluded from this measure due to frailty and/or advanced illness. Click the following link to review the master code list for exclusions: [Exclusion Codes](#)

If you have any questions, please contact your Provider Relations Specialist.