



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 health care 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 to 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
- 1/1 – 12/31

Stars/Quality Specifications

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

Strategies for Success

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

Coding and Documentation Tips

CPT Codes:

- **G9708:** Patient had bilateral mastectomy or unilateral mastectomy
- **G9709:** Patient in hospice (not recommended)

CPT II Codes:

- **3014F:** Screening documented and reviewed
- **3014F-8P:** Screening not recommended for other reasons

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

If you have questions, please contact your provider relations specialist.