

Breast Cancer Screening

Measure Information

General eCQM Information	
Title	Breast Cancer Screening
CMS eCQM ID	CMS125v13
CBE ID*	Not Applicable
MIPS Quality ID	112
Measure Steward	National Committee for Quality Assurance
Description	Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer in the 27 months prior to the end of the Measurement Period
Measure Scoring	Proportion measure
Measure Type	Process
Stratification	None
Risk Adjustment	None
Rationale	Breast cancer is one of the most common types of cancers, accounting for 15 percent of all new cancer diagnoses in the U.S. (Noone et al., 2018). In 2015, over 3 million women were estimated to be living with breast cancer in the U.S. and it is estimated that 12 percent of women will be diagnosed with breast cancer at some point during their lifetime (Noone et al., 2018). While there are other factors that affect a woman's risk of developing breast cancer, advancing age is a primary risk factor. Breast cancer is most frequently diagnosed among women ages 55-64; the median age at diagnosis is 62 years (Noone et al., 2018). The chance of a woman being diagnosed with breast cancer in a given year increases with age. By age 40, the chances are 1 in 68; by age 50 it becomes 1 in 43; by age 60, it is 1 in 29 (American Cancer Society, 2017).
Clinical Recommendation Statement	The U.S. Preventive Services Task Force (USPSTF) recommends biennial screening mammography for women aged 50-74 years (B recommendation) (USPSTF, 2016).

	The decision to start screening mammography in women prior to age 50 years should be an individual one. Women who place a higher value on the potential benefit than the potential harms may choose to begin biennial screening between the ages of 40 and 49 years (C recommendation) (USPSTF, 2016). The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of screening mammography in women aged 75 years or older (I statement) (USPSTF, 2016). The USPSTF concludes that the current evidence is insufficient to assess the benefits and harms of digital breast tomosynthesis (DBT) as a primary screening method for breast cancer (I statement) (USPSTF, 2016). The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of adjunctive screening for breast cancer using breast ultrasonography, magnetic resonance imaging, DBT, or other methods in women identified to have dense breasts on an otherwise negative screening mammogram (I statement) (USPSTF, 2016). The National Comprehensive Cancer Network (NCCN) and the American College of Radiology (ACR) recommend using conventional mammography or DBT for screening women at low, intermediate or high risk for breast cancer (NCCN, 2021) (ACR, 2017).
Improvement Notation	Higher score equals better quality
Definition	None
Guidance	This measure evaluates primary screening. Do not count biopsies, breast ultrasounds, or MRIs because they are not appropriate methods for primary breast cancer screening. Please note the measure may include screenings performed outside the age range of patients referenced in the initial population. Screenings that occur prior to the measurement period are valid to meet measure criteria. This eCQM is a patient-based measure. This version of the eCQM uses QDM version 5.6. Please refer to the QDM page for more information on the QDM.
Initial Population	Women 52-74 years of age by the end of the measurement period with a visit during the measurement period
Denominator	Equals Initial Population

Denominator Exclusions	Exclude patients who are in hospice care for any part of the measurement period. Women who had a bilateral mastectomy or who have a history of a bilateral mastectomy or for whom there is evidence of a right and a left unilateral mastectomy on or before the end of the measurement period. Exclude patients 66 and older by the end of the measurement period with an indication of frailty for any part of the measurement period who also meet any of the following advanced illness criteria: • Advanced illness diagnosis during the measurement period or the year prior • OR taking dementia medications during the measurement period or the year prior Exclude patients 66 and older by the end of the measurement period who are living long term in a nursing home any time on or before the end of the measurement period. Exclude patients receiving palliative care for any part of the measurement period.
Numerator	Women with one or more mammograms any time on or between October 1 two years prior to the measurement period and the end of the measurement period
Numerator Exclusions	Not Applicable
Denominator Exceptions	None
Telehealth Eligible	Yes
Next Version	No Version Available
Previous Version	CMS125v12

*Verify active CBE endorsement on the CMS certified consensus-based entity's [PQM website](#)

Specifications and Measure Resources

- Specifications:
 - [CMS125v13.html](#)
 - [CMS125v13.zip](#)

Additional Resources for CMS125v13

- [Value Sets](#)
- [Data Elements](#)
- [eCQM Flow](#)
- [Technical Release Notes](#)

- [Jira Issue Tracker Tickets](#)

*Note there may be more tickets for CMS125v13 in the [eCQM Tracker - ONC Project Tracking System \(Jira\)](#). Only tickets tagged with their associated CMS measure ID appear.

Use the eCQM Tracker to [open new issues](#) regarding eCQM implementation. [Log in](#) required.

Technical Release Notes

- [CMS125V13-TRN.xlsx](#)

Header

- Updated the [eCQM](#) version number.
Measure Section: eCQM Version Number
Source of Change: Annual Update
- Changed all references from NQF to [CBE](#) to identify the consensus-based entity role.
Measure Section: CBE Number
Source of Change: Annual Update
- Updated copyright.
Measure Section: Copyright
Source of Change: Annual Update
- Aligned order of exclusions listed in the narrative and logic to improve overall readability.
Measure Section: [Denominator Exclusions](#)
Source of Change: Measure Lead
- Reduced the complexity of advanced illness criteria by removing the requirement to have at least two outpatient encounters or one inpatient encounter with the advanced illness diagnosis.
Measure Section: Denominator Exclusions
Source of Change: Measure Lead

Logic

- Updated the version number of the Palliative Care Exclusion Library to v4.0.000 and the library name from 'PalliativeCareExclusionECQM' to 'PalliativeCareQDM.'
Measure Section: Definitions
Source of Change: Annual Update
- Updated the version number of the Measure Authoring Tool (MAT) Global Common Functions Library to v8.0.000 and the library name from 'MATGlobalCommonFunctions' to 'MATGlobalCommonFunctionsQDM.'
Measure Section: Definitions
Source of Change: Annual Update
- Updated the version number of the Hospice Library to v6.0.000 and the library name from 'Hospice' to 'HospiceQDM.'

Measure Section: Definitions

Source of Change: Annual Update

- Updated the version number of the Advanced Illness and Frailty Exclusion ECQM Library to v9.0.000 and the library name from 'AdvancedIllnessandFrailtyExclusionECQM' to 'AdvancedIllnessandFrailtyQDM.'

Measure Section: Definitions

Source of Change: Annual Update

- Updated the timing comparison precision in the definitions from datetime to date by adding 'day of' operator to align with the measure intent and address time zone issues.

Measure Section: Definitions

Source of Change: Measure Lead

- Updated the [value set](#) name for 'Online Assessments' to 'Virtual Encounter' for a more accurate description.

Measure Section: Definitions

Source of Change: Measure Lead

- Renamed value set to 'Payer Type' to more accurately reflect the contents and intent of the value set.

Measure Section: Definitions

Source of Change: Standards/Technical Update

- Reduced the complexity of advanced illness criteria by removing the requirement to have at least two outpatient encounters or one inpatient encounter with the advanced illness diagnosis.

Measure Section: Definitions

Source of Change: Measure Lead

- Updated the version number of the Adult Outpatient Encounters Library to v4.0.000 and the library name from 'AdultOutpatientEncounters' to 'AdultOutpatientEncountersQDM.'

Measure Section: Definitions

Source of Change: Annual Update

- Updated the version number of the Measure Authoring Tool (MAT) Global Common Functions Library to v8.0.000 and the library name from 'MATGlobalCommonFunctions' to 'MATGlobalCommonFunctionsQDM.'

Measure Section: Functions

Source of Change: Annual Update

Value Set

The VSAC is the source of truth for the value set content, please visit the [VSAC](#) for downloads of current value sets.

- Removed ICD-9 extensional value sets from select grouping value sets, leaving codes from active terminologies (ICD-10 and SNOMED), to reduce implementer burden.

Measure Section: Terminology

Source of Change: Standards/Technical Update

- Removed value set Acute Inpatient (2.16.840.1.113883.3.464.1003.101.12.1083) based on change in measure requirements/measure [specification](#).

Measure Section: Terminology

Source of Change: Measure Lead

- Value set Advanced Illness (2.16.840.1.113883.3.464.1003.110.12.1082): Added 69 ICD-10-CM codes based on review by technical experts, [SMEs](#), and/or public feedback. Deleted 5 ICD-10-CM codes (F01.51, F02.81, F03.91, J84.17, K74.0) based on review by technical experts, SMEs, and/or public feedback. Added 109 SNOMED CT codes based on review by technical experts, SMEs, and/or public feedback. Deleted 22 SNOMED CT codes based on review by technical experts, SMEs, and/or public feedback.

Measure Section: Terminology

Source of Change: Measure Lead

- Value set Annual Wellness Visit (2.16.840.1.113883.3.526.3.1240): Added 3 SNOMED CT codes (86013001, 90526000, 866149003) based on review by technical experts, SMEs, and/or public feedback. Added 1 HCPCS code (G0402) based on review by technical experts, SMEs, and/or public feedback.

Measure Section: Terminology

Source of Change: Measure Lead

- Value set Bilateral Mastectomy (2.16.840.1.113883.3.464.1003.198.12.1005): Added 3 SNOMED CT codes (1268980002, 1269061009, 1279986002) based on review by technical experts, SMEs, and/or public feedback. Deleted 4 ICD-9-CM codes (85.42, 85.44, 85.46, 85.48) based on applicability of value set and/or OID.

Measure Section: Terminology

Source of Change: Measure Lead

- Removed value set Emergency Department Evaluation and Management Visit (2.16.840.1.113883.3.464.1003.101.12.1010) based on change in measure requirements/measure specification.

Measure Section: Terminology

Source of Change: Measure Lead

- Value set Frailty Device (2.16.840.1.113883.3.464.1003.118.12.1300): Added 12 SNOMED CT codes based on review by technical experts, SMEs, and/or public feedback. Deleted 14 SNOMED CT codes based on review by technical experts, SMEs, and/or public feedback.

Measure Section: Terminology

Source of Change: Measure Lead

- Value set Frailty Diagnosis (2.16.840.1.113883.3.464.1003.113.12.1074): Deleted 7 SNOMED CT codes (414188008, 414189000, 16728003, 162845004, 699215008, 699218005, 459821000124104) based on review by technical experts, SMEs, and/or public feedback.

Measure Section: Terminology

Source of Change: Measure Lead

- Value set Frailty Symptom (2.16.840.1.113883.3.464.1003.113.12.1075): Deleted 10 SNOMED CT codes (267031002, 272062008, 314109004, 271875007, 394616008, 163600007, 163695007, 268964003, 272036004, 225612007) based on review by technical experts, SMEs, and/or public feedback.
Measure Section: Terminology
Source of Change: Measure Lead
- Value set History of bilateral mastectomy (2.16.840.1.113883.3.464.1003.198.12.1068): Added 1 SNOMED CT code (16087411000119102) based on review by technical experts, SMEs, and/or public feedback.
Measure Section: Terminology
Source of Change: Measure Lead
- Value set Home Healthcare Services (2.16.840.1.113883.3.464.1003.101.12.1016): Deleted 1 CPT code (99343) based on review by technical experts, SMEs, and/or public feedback.
Measure Section: Terminology
Source of Change: Measure Lead
- Value set Hospice Care Ambulatory (2.16.840.1.113883.3.526.3.1584): Added 2 SNOMED CT codes (170935008, 170936009) based on review by technical experts, SMEs, and/or public feedback. Deleted 1 SNOMED CT code (385765002) based on review by technical experts, SMEs, and/or public feedback.
Measure Section: Terminology
Source of Change: Measure Lead
- Removed value set Nonacute Inpatient (2.16.840.1.113883.3.464.1003.101.12.1084) based on change in measure requirements/measure specification.
Measure Section: Terminology
Source of Change: Measure Lead
- Removed value set Observation (2.16.840.1.113883.3.464.1003.101.12.1086) based on review by technical experts, SMEs, and/or public feedback.
Measure Section: Terminology
Source of Change: Measure Lead
- Value set Office Visit (2.16.840.1.113883.3.464.1003.101.12.1001): Deleted 2 SNOMED CT codes (30346009, 37894004) based on review by technical experts, SMEs, and/or public feedback. Deleted 1 CPT code (99201) based on review by technical experts, SMEs, and/or public feedback.
Measure Section: Terminology
Source of Change: Measure Lead
- Value set Virtual Encounter (2.16.840.1.113883.3.464.1003.101.12.1089): Deleted 2 CPT codes (98969, 99444) based on review by technical experts, SMEs, and/or public feedback. Deleted 3 HCPCS codes (G2061, G2062, G2063) based on review by technical experts, SMEs, and/or public feedback.
Measure Section: Terminology
Source of Change: Measure Lead

- Removed value set Outpatient (2.16.840.1.113883.3.464.1003.101.12.1087) based on review by technical experts, SMEs, and/or public feedback.
Measure Section: Terminology
Source of Change: Measure Lead
- Value set Palliative Care Encounter (2.16.840.1.113883.3.464.1003.101.12.1090): Added 3 SNOMED CT codes (305686008, 305824005, 441874000) based on review by technical experts, SMEs, and/or public feedback.
Measure Section: Terminology
Source of Change: Measure Lead
- Value set (2.16.840.1.114222.4.11.3591): Renamed to Payer Type based on recommended value set naming conventions.
Measure Section: Terminology
Source of Change: Annual Update
- Value set Unilateral Mastectomy, Unspecified Laterality (2.16.840.1.113883.3.464.1003.198.12.1071): Deleted 1 ICD-9-CM code (V45.71) based on applicability of value set and/or OID.
Measure Section: Terminology
Source of Change: Annual Update
- Value set (2.16.840.1.113883.3.464.1003.101.12.1089): Renamed to Virtual Encounter based on recommended value set naming conventions.
Measure Section: Terminology
Source of Change: Annual Update