

HEDIS® MY 2026

Breast Cancer Screening (BCS-E)¹



Early breast cancer detection is critical to improving survival, and clinical evidence shows women who get routine breast cancer screenings at age 40 have significantly better outcomes.

Breast cancer often presents with no symptoms, so routine mammography beginning at age 40 is essential. Yet member data shows lower screening rates among women 40–49 years of age, particularly those living in rural areas, highlighting an urgent need for targeted intervention.²

Your partnership is critical to ensuring every eligible member receives, or is recommended for, a mammogram as part of their preventive care. Please prioritize outreach and education for women 40–74 years of age during upcoming visits.

Key strategies to increase overall breast cancer screenings and reduce disparities in the 40-49 age group and in rural areas:



Increase breast cancer screenings and awareness³

- ✓ Review care gap reports for patients needing a mammogram with your Quality Practice Advisor (QPA), highlighting priority outreach groups (especially ages 40–49 and rural ZIP codes).
- ✓ If you do not have a QPA, review your own care gap reports and prioritize outreach to women ages 40–49 and those in rural ZIP codes.
- ✓ Educate patients on the importance of early detection during annual preventive visits.
- ✓ Reinforce breast self-awareness and emphasize the need for both routine mammograms and regular self-exams.
- ✓ Use every visit as a screening touchpoint: Check mammogram status during all encounters—annual, sick visits, telehealth, and OB/GYN visits.

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Educate and encourage³

- ✓ Emphasize the importance of early detection and routine mammograms regardless of symptoms or family history.
- ✓ Reinforce breast self-awareness and the importance of self-exams.
- ✓ Utilize shared decision-making to dispel myths about radiation, discomfort, or perceived low breast cancer risk.
- ✓ Automate EHR prompts to begin screening conversations when patients turn 40.



Ensure Continuity of Care³

Remind patients to complete a Release of Information (ROI) at their radiology appointment so you receive their results.

- ✓ Partner with mobile mammography units when available.
- ✓ Offer flexible scheduling, early morning/evening slots, and reminders timed around community events.
- ✓ Address any barriers (e.g., transportation, timing) and assist with Care Management referrals.
- ✓ Assist patients with scheduling mammograms at the end of every visit.



Strengthen follow-up care for abnormal results³

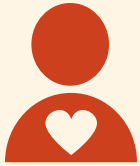
- ✓ Implement a result-tracking workflow to flag all abnormal mammograms (BI-RADS 3–5).
- ✓ Ensure continuity of care by following up on mammography orders. If no result is received within 10–14 days, contact the radiology facility.
- ✓ Refer patients with abnormal findings to specialists (radiology/oncology) promptly. Care Management can support urgent care coordination and overcome patient barriers.



Improve documentation accuracy³

- ✓ Record month/year of last mammogram.
- ✓ Document mastectomy status or other exclusions annually, including month and year (use of Z codes is best practice).

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Benefits

Breast cancer screening is a covered benefit for eligible enrollees. Members may also qualify for a reward through the My Health Pays[®] program upon completion of a breast cancer screening.

The Pay for Quality/Performance programs offer opportunities to earn incentives while advancing patient-centered care. These programs are designed to improve quality outcomes by emphasizing preventive and screening services and fostering meaningful member engagement. Providers are encouraged to take action by scheduling visits, addressing care gaps, and developing individualized care plans. Additional details are available in the program materials.

Screening Codes and Description⁴

77061	Diagnostic digital breast tomosynthesis, unilateral
77062	Diagnostic digital breast tomosynthesis, bilateral
77063	Screening digital breast tomosynthesis, bilateral
77065	Diagnostic mammography, including computer - aided detection (CAD) when performed, unilateral
77066	Diagnostic mammography, including computer - aided detection (CAD) when performed, bilateral
77067	Screening mammography, bilateral (2 view study of each breast) including computer-aided detection (CAD) when performed

We are here to help with coordination of²:

- ✓ Referrals for follow-up for enrollees with abnormal mammography results.
- ✓ Follow-up with radiologist and/or radiation/oncologist for abnormal results.
- ✓ Enrollee reminders.



If you identify barriers, such as scheduling or transportation, that prevent members from completing screenings, please contact our Kentucky Care Management team for support.

Medicaid: 1-844-901-3780

Medicare: 1-866-635-7045

Ambetter: 1-833-705-2175 (TTY: 711)



Thank you for your time and continued partnership.

¹ HEDIS Measurement Year 2026 Volume 2: Technical Specifications for Health Plans

² jamanetwork.com/journals/jama/fullarticle/2818283

³ WellCare best practices

⁴ HEDIS MY 2026 Volume 2 Value Set Directory