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Mammography Indications-Screening and Diagnostic Adjudication Rule

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Abstract

For Members

A mammogram is an x-ray photograph of the breast. There are two types of mammograms widely used.

Screening mammograms are typically done every year for all the females over 40 years of age, to check the breasts for any early signs of breast cancer.

Diagnostic mammograms are different from screening mammograms in that they focus on getting more information about a specific area (or areas) of concern usually due to a suspicious screening mammogram or a suspicious lump.

Daman covers both screening and diagnostic mammograms if medically justified as per the best international medical practice and as per the policy terms and conditions of each Health Insurance Plan administered by Daman.

For Medical Professionals

Screening mammogram is performed to detect unsuspected breast cancer in asymptomatic women. Standard views are obtained and supervision of interpreting physician not required. The x-ray images make it possible to detect changes or tumors up to two years before a patient or physician can feel them.

Diagnostic mammogram is performed if any signs and symptoms of breast disease appear, to evaluate the changes found during a screening mammogram or to view breast tissue when it is difficult to obtain a screening mammogram because of special circumstances (such as the presence of breast implants). Diagnostic mammography requires direct supervision of interpreting physician.

Daman covers annual screening mammography after 35 years of age, for all those women having the coverage benefit in their policy.

Daman considers diagnostic mammography as medically necessary for both male and female, if there are signs and symptoms of breast disease as per the indications mentioned in coverage criteria below.

Approved by:
Daman

Responsible:
Medical Strategy &
Development Department

Related Adjudication Rules:
None

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Scope

This guideline highlights the coverage details for screening and diagnostic mammography for all health insurance plans administered by Daman as per the policy terms and conditions.

All the international standards like the American Cancer Society (ACS), American College of Radiology (ACR), American College of Obstetricians and Gynecologists (ACOG), and National Comprehensive Cancer Network (NCCN) are recommending annual screening mammography for average risk women from age of 40 years onwards.

Adjudication Policy

Eligibility / Coverage Criteria

Daman covers annual **Screening Mammography** (if the plan is having coverage benefit) for all women above the age of 35 years (given as additional benefit by Daman after 35 years onwards rather than from 40 years onwards as per international best practice standards).

Daman covers screening mammography to designated (network) providers only.

Daman considers **Diagnostic Mammography** as medically necessary for both male and female when:

1. Signs and symptoms suggestive of breast disease including but not limited to lump or discrete thickening, localized nodularity, dimpling or contour deformity, serous or sanguineous nipple discharge, non-cyclical localized pain or tenderness
2. Surveillance/follow-up with proven breast cancer, and those with previous biopsy result of atypia or proliferative disease and lobular carcinoma *in situ* (LCIS)
3. Complications of primary breast implants (if done after mastectomy following breast cancer) i.e. rupture, infections, pathological capsule;
4. Work-up of patient with abnormal screening mammogram
5. Short-interval follow-up (e.g. less than one year) for probably benign radiographic concerns as defined by the ACR Breast Imaging Reporting and Data System (BI-RADS®)

All the information and findings for both, screening or diagnostic mammography have to be well documented along with reports.

Requirements for Coverage

ICD and CPT codes must be coded to the highest level of specificity.

Non-Coverage

- Daman does not cover Screening Mammography for health insurance plans, which do not have this benefit
- Daman does not cover Diagnostic Mammography for the Visitor's Plan

Payment and Coding Rules

Please apply HAAD payment rules and regulations and relevant coding manuals for ICD, CPT, etc.

Coding Rules for Computer-Aided Mammography

Code	Description	Usage
+77051	Computer-aided detection (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation, with or without digitization of film radiographic images; diagnostic mammography (list separately in addition to code for primary procedure)	Add on code to be coded in conjunction with 77055 and 77056, if required for diagnostic mammography only
+77052	Computer-aided detection (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation, with or without digitization of film radiographic images; screening mammography (list separately in addition to code for primary procedure)	Add on code to be coded in conjunction with 77057, if required for screening mammography only

Adjudication Examples

Example 1

Question 1: A 40 year old lady, holding Thiqa card visited a clinic for annual screening mammogram. Provider is reporting the claim with the diagnoses of screening mammogram (V76.12) and with the mammography bilateral (77056). Will this claim be paid?

Answer: No, the service will be rejected with MNEC-003 as the service done is for diagnostic mammogram, not screening.

Example 2

Question 2: A 36 year old female, Basic card holder visited for annual screening mammogram with normal risk. Provider is reporting the claim

with the diagnoses of screening mammogram (V76.12) and with the screening mammography bilateral (77057). Will this claim be paid?

Answer: No, the claim will be rejected as NVOV-001 as screening mammogram is not covered for this plan.

Example 3

Question 3: A 38 year old female, holding Regional plan card, visited for annual screening mammogram with normal risk. Provider is reporting the claim with the diagnoses of screening mammogram (V76.12) and with the screening mammography bilateral (77057). Will this claim be paid?

Answer: Yes, the claim is payable if the service is performed at a designated provider for screening mammography.

Example 4

Question 4: A 40 year old lady, International card holder visited for annual screening mammogram with normal risk. Provider is reporting the claim with the diagnoses of screening mammogram (V76.12) and with the screening mammography bilateral (77057) and computer-aided detection mammography (77051). Will this claim be paid?

Answer: The entire claim will be paid except 77051 as this computer-aided code is for diagnostic mammography.

Denial codes

Code	Code description
NCOV-001	Diagnosis (es) is (are) not covered.
NCOV-003	Service(s) is (are) not covered.
MNEC-003	Service is not clinically indicated based on good clinical practice.
MNEC-004	Service is not clinically indicated based on good clinical practice, without additional supporting diagnosis/activities.
ELIG-007	Services performed by a non-network provider.
AUTH-001	Prior approval is required and was not obtained
CODE-015	Activity/diagnosis inconsistent with the provider type.

Appendices

A. References

1. The American College of Radiology. (2008). PERFORMANCE OF SCREENING AND DIAGNOSTIC MAMMOGRAPHY. ACR PRACTICE GUIDELINE. 1 (1), p1-10.
2. The Institute of Cancer Research. (Feb 2011). Mammographic screening guidelines for women with a family history of breast and/or ovarian cancer frequently asked questions. The Royal Marsden NHS Foundation. 1 (1), p1-4.
3. National Comprehensive Cancer Network (NCCN). (2012). Breast Cancer Screening and Diagnosis. NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines). 1 (1), p 1-56.
4. National Institute for Health and Clinical Excellence. (October 2006). Women with breast cancer in the family. Understanding NICE guidance. 41 (1), p 1-16.
5. The American College of Obstetricians and Gynecologists (The College). (2011). Annual Mammograms Now Recommended for Women Beginning at Age 40. Available: http://www.acog.org/About_ACOG/News_Room/News_Releases/2011/Annual_Mammograms_Now_Recommended_for_Women_Beginning_at_Age_40. Last accessed 20th September 2012.
6. The American College of Radiology. (June 20/ 2012). ACR Pleased that AMA Breast Cancer Screening Position Recognizes Importance of Screening Beginning at Age 40. Available: <http://www.acr.org/About-Us/Media-Center/Press-Releases/2012-Press-Releases/20120620-ACR-Pleased-AMA-Breast-Cancer-Screening-Position>. Last accessed 15th of September 2012.
7. AMA ICD 9 CM and CPT books.
8. Daman General Exclusions and SOBs.

B. Revision History

Date	Change(s)
01-07-13	V 1.1: New template
15-07-14	1. V 2.0 2. Disclaimer updated as per system requirements