

## Payer Provider Partnership Understanding of Preventive Coding for Screening Mammography

The Affordable Care Act and Vermont law provide that preventive mammography are covered without cost share. When screening CPT and ICD10 codes are utilized, the mammography claim will process with no member cost share upon initial submission. If a subsequent mammogram is needed because the first mammogram was inconclusive when identified by the radiologist interpreting the images as a BI-RADS 0 (zero), such claim should also process without member cost share. The BI-RADS system was developed by the American College of radiology as a way to score all mammograms

(see <https://www.cancer.org/cancer/breast-cancer/screening-tests-and-earlydetection/mammograms/understanding-your-mammogram-report.html> for more information)

The following is a proposal to standardize across all payers agreed upon coding to ensure claims pay consistently:

For initial mammography that is a screening mammography the following coding will process at no member cost share:

CPT	ICD 10
77067, 77063, , G0202 Use Modifier -52 for unilateral exam	Z00.00; Z00.01, Z12.31, Z12.39, Z80.3, Z85.3, Z90.10, Z90.11, Z90.12, Z90.13

For additional views or “call backs” if the initial screening mammography resulted in a BI-RADS 0 exam, the following CPT & ICD 10 will be used and shall process at no member cost share. No modifier is necessary to indicate screening.

CPT	ICD 10
77067, 77063, , G0202 Use Modifier -52 for unilateral exam	R92.2, R92.8

Please also note that there is no 365 day payer requirement for the performance of a screening mammography. If a repeat screening mammogram is necessary at six month intervals, that service will not require medical exception review or intervention to adjudicate at no cost share if the screening coding is used as described above.

Diagnostic mammography billed with CPT 77065, 77066, G 0204, G0206, G0279 are not preventive pursuant to the Affordable Care Act and shall be subject to standard cost share obligations. Examinations of the breast by other modalities such as ultrasound may also take cost share.

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International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM)