Measure #71: Hormonal Therapy for Stage IC - III ER/PR Positive Breast Cancer

DESCRIPTION:
Percentage of female patients aged 18 years and older with Stage IC through IIIC, estrogen receptor (ER) or progesterone receptor (PR) positive breast cancer who were prescribed tamoxifen or aromatase inhibitor (AI) during the 12-month reporting period

INSTRUCTIONS:
This measure is to be reported a minimum of once per reporting period for all female patients with breast cancer seen during the reporting period. It is anticipated that clinicians who treat female patients with Stage IC through IIIC, estrogen receptor (ER) or progesterone receptor (PR) positive breast cancer will submit this measure.

This measure is reported using CPT Category II codes:
ICD-9 diagnosis codes, CPT E/M service codes, and patient demographics (age, gender, etc.) are used to identify patients who are included in the measure's denominator. CPT Category II codes are used to report the numerator of the measure.

When reporting the measure, submit the listed ICD-9 diagnosis codes, CPT E/M service codes, and the appropriate CPT Category II codes OR the CPT Category II code(s) with the modifier. The modifiers allowed for this measure are: 1P- medical reasons, 2P- patient reasons, 3P- system reasons, 8P- reasons not otherwise specified.

NUMERATOR:
Patients who were prescribed tamoxifen or aromatase inhibitor (AI) during the 12 month reporting period

NUMERATOR NOTE: *The correct combination of numerator code(s) must be reported on the claim form in order to properly report this measure. The "correct combination" of codes may require the submission of multiple numerator codes.*

Numerator Coding:
Tamoxifen or Aromatase Inhibitor Prescribed
(Three CPT II codes [4179F & 33xxF & 3315F] are required on the claim form to submit this category)

Report 3305F for the Stage T1c Breast Cancer – Tumor more than 1 cm but not more than 2 cm in greatest dimension

CPT II 4179F: Tamoxifen or aromatase inhibitor (AI) prescribed
AND

CPT II 3305F: AJCC Cancer Stage IC, documented
OR
CPT II 3306F: AJCC Cancer Stage IIA, documented
OR

CPT II 3307F: AJCC Cancer Stage IIB, documented
OR
CPT II 3309F: AJCC Cancer Stage IIIA, documented
OR
CPT II 3310F: AJCC Cancer Stage IIIB, documented
OR
CPT II 3311F: AJCC Cancer Stage IIIC, documented

AND
CPT II 3315F: Estrogen receptor (ER) or progesterone receptor (PR) positive breast cancer

OR

Tamoxifen or Aromatase Inhibitor not Prescribed for Medical, Patient, or System Reasons
(Three CPT II codes [4179F-xP & 33xxF & 3315F] are required on the claim form to submit this category)

Append a modifier (1P, 2P, or 3P) to CPT Category II code 4179F to report documented circumstances that appropriately exclude patients from the denominator

- 4179F *with* 1P: Documentation of medical reason(s) for not prescribing tamoxifen or aromatase inhibitor (eg, patient's disease has progressed to metastatic; patient is receiving a gonadotropin-releasing hormone analogue, patient has received oophorectomy, patient is receiving radiation or chemotherapy, patient's diagnosis date was ≥ 5 years from reporting date)
- 4179F *with* 2P: Documentation of patient reason(s) for not prescribing tamoxifen or aromatase inhibitor (eg, patient refusal)
- 4179F *with* 3P: Documentation of system reason(s) for not prescribing tamoxifen or aromatase inhibitor (eg, patient is currently enrolled in a clinical trial)

AND

CPT II 3305F: AJCC Cancer Stage IC, documented
OR
CPT II 3306F: AJCC Cancer Stage IIA, documented
OR
CPT II 3307F: AJCC Cancer Stage IIB, documented
OR
CPT II 3309F: AJCC Cancer Stage IIIA, documented
OR
CPT II 3310F: AJCC Cancer Stage IIIB, documented
OR
CPT II 3311F: AJCC Cancer Stage IIIC, documented

AND
CPT II 3315F: Estrogen receptor (ER) or progesterone receptor (PR) positive breast cancer

OR

If patient is not eligible for this measure because patient is not stage IC through IIIC breast cancer, report:
Patient not Stage IC through IIIC Breast Cancer
(One CPT II code [33xxF] is required on the claim form to submit this category)
Note: If reporting a code from the category below (3302F, 3303F, or 3312F), it is not necessary to report the patient's ER/PR status.

Report 3303F for the following Stage I Breast Cancers:
T1a - Tumor more than 0.1 cm but not more than 0.5 cm in greatest dimension
T1b - Tumor more than 0.5 cm but not more than 1 cm in greatest dimension

CPT II 3302F: AJCC Cancer Stage 0, documented
OR
CPT II 3303F: AJCC Cancer Stage IA, documented
OR
CPT II 3312F: AJCC Cancer Stage IV, documented

OR

If patient is not eligible for this measure because patient is estrogen receptor (ER) and progesterone receptor (PR) negative, report:
Patient is Estrogen Receptor (ER) and Progesterone Receptor (PR) Negative
(One CPT II code [3316F] is required on the claim form to submit this category)
Note: If reporting code 3316F, it is not necessary to report the patient's AJCC Cancer Stage.

CPT II 3316F: Estrogen receptor (ER) and progesterone receptor (PR) negative breast cancer

OR

If patient is not eligible for this measure because the cancer stage is not documented OR the ER/PR is not documented, report:
Cancer Stage not Documented OR ER/PR not Documented
(One CPT II code [33xxF-8P] is required on the claim form to submit this category)

Append a reporting modifier (8P) to one of the following CPT Category II codes to report circumstances when the patient is not eligible for the measure.

- 3305F *with* 8P: No documentation of cancer stage

OR

- 3316F *with* 8P: No documentation of estrogen receptor (ER) and progesterone receptor (PR) status

OR

Tamoxifen or Aromatase Inhibitor not Prescribed, Reason not Specified
(Three CPT II codes [4179F-8P & 33xxF & 3315F] are required on the claim form to submit this category)

Append a reporting modifier (8P) to CPT Category II code 4179F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

- 4179F *with* 8P: Tamoxifen or aromatase inhibitor not prescribed, reason not otherwise specified

AND

CPT II 3305F: AJCC Cancer Stage IC, documented
OR
CPT II 3306F: AJCC Cancer Stage IIA, documented
OR
CPT II 3307F: AJCC Cancer Stage IIB, documented
OR
CPT II 3309F: AJCC Cancer Stage IIIA, documented
OR
CPT II 3310F: AJCC Cancer Stage IIIB, documented
OR
CPT II 3311F: AJCC Cancer Stage IIIC, documented

AND
CPT II 3315F: Estrogen receptor (ER) or progesterone receptor (PR) positive breast cancer

DENOMINATOR:
All female patients aged 18 years and older with Stage IC through IIIC, estrogen receptor (ER) or progesterone receptor (PR) positive breast cancer

Denominator Coding:
An ICD-9 diagnosis code for breast cancer and a CPT E/M service code are required to identify patients for denominator inclusion.
ICD-9 diagnosis codes: 174.0, 174.1, 174.2, 174.3, 174.4, 174.5, 174.6, 174.8, 174.9
AND
CPT E/M service codes: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215

RATIONALE:
Despite evidence suggesting the role of adjuvant endocrine therapy in lowering the risk of tumor recurrence, many female patients who should be receiving this therapy are not. This measure assesses whether patients with a certain stage of breast cancer (IC through IIIC) and ER/PR+ are currently receiving the therapy. There are allowable medical, patient, and system reasons to document instances in which a woman with stage IC through IIIC, ER/PR+ may not be a candidate for the therapy. Note: the reporting/managing physician does not need to have actually written the

prescription; however the reporting/managing physician must verify that the patient already has been prescribed the hormonal therapy by another physician.

CLINICAL RECOMMENDATION STATEMENTS:

Adjuvant therapy for postmenopausal women with hormone receptor–positive breast cancer should include an aromatase inhibitor in order to lower the risk of tumor recurrence. Aromatase inhibitors are appropriate as initial treatment for women with contraindications to tamoxifen. For all other postmenopausal women, treatment options include 5 years of aromatase inhibitors treatment or sequential therapy consisting of tamoxifen (for either 2 to 3 years or 5 years) followed by aromatase inhibitors for 2 to 3, or 5 years (ASCO guidelines include narrative rankings). (ASCO)

Patients intolerant of aromatase inhibitors should receive tamoxifen. Women with hormone receptor–negative tumors should not receive adjuvant endocrine therapy (ASCO guidelines include narrative rankings). (ASCO)

Patients with invasive breast cancers that are estrogen or progesterone receptor positive should be considered for adjuvant endocrine therapy regardless of patient age, lymph node status, or whether or not adjuvant chemotherapy is to be administered (Category 2A). (NCCN)

The most firmly established adjuvant endocrine therapy is tamoxifen for both premenopausal and postmenopausal women. Prospective, randomized trials demonstrate that the optimal duration of tamoxifen appears to be five years. In patients receiving both tamoxifen and chemotherapy, chemotherapy should be given first, followed by sequential tamoxifen. Several studies have evaluated aromatase inhibitors in the treatment of postmenopausal women with early-stage breast cancer (Category 2A). (NCCN)