

Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening

Physician Quality Reporting System Data Collection Sheet

Patient's Name	Practice Medical Record Number (MRN)	Birth Date (mm/dd/yyyy) / /	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
National Provider Identifier (NPI)		Date of Service	

Clinical Information			Billing Information												
Step 1 Is patient eligible for this measure?															
	Yes	No	Code Required on Claim Form												
Any patient regardless of age.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.												
Patient has a diagnosis for a screening mammogram.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes. Codes determining a patient's eligibility must be reported on the same claim as the quality code(s) identified below.												
There is a CPT Code or G-Code for a screening mammogram.	<input type="checkbox"/>	<input type="checkbox"/>													
If No is checked for any of the above, STOP. Do not report a CPT category II code.															
Step 2 Does patient meet the measure?															
Mammogram Assessment Category¹ of “Probably Benign”²	Yes	No	Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)												
Classified ³	<input type="checkbox"/>	<input type="checkbox"/>	3343F												
			If No is checked for the above, report the appropriate code that corresponds to the following alternative assessment categories:												
			<table border="0"> <tr> <td>“incomplete: needs additional imaging evaluation”</td> <td style="text-align: right;">3340F</td> </tr> <tr> <td>“negative”</td> <td style="text-align: right;">3341F</td> </tr> <tr> <td>“benign”</td> <td style="text-align: right;">3342F</td> </tr> <tr> <td>“suspicious”</td> <td style="text-align: right;">3344F</td> </tr> <tr> <td>“highly suggestive of malignancy”</td> <td style="text-align: right;">3345F</td> </tr> <tr> <td>“known biopsy proven malignancy”</td> <td style="text-align: right;">3350F</td> </tr> </table>	“incomplete: needs additional imaging evaluation”	3340F	“negative”	3341F	“benign”	3342F	“suspicious”	3344F	“highly suggestive of malignancy”	3345F	“known biopsy proven malignancy”	3350F
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¹The mammogram assessment category (and corresponding CPT Category II code) to be reported is the single overall final assessment for the mammographic study. Separate breast assessment categories should not be reported for this measure.

²“Probably Benign” Classification: MQSA assessment category of “probably benign”; BI-RADS® category 3; or FDA-approved equivalent assessment category.

³This is an overuse measure. For performance, a lower percentage, with a definitional target approaching 0%, indicates appropriate assessment of screening mammograms (eg, the proportion of screening mammograms that are classified as “probably benign”).