

# 2025 Medicare Mammogram Facility Incentive Program

## **Program Announcement**

Wellcare By Health Net (Health Net\*) Mammogram Facility Incentive Program recognizes contracted radiology facilities that deliver and appropriately document quality care. Contracted radiology facilities can earn an incentive by contacting predefined members to schedule and close the breast cancer screening HEDIS<sup>®1</sup> measure between **April 1, 2025, and December 31, 2025**. Contracted radiology facilities must agree to participate in the 2025 program for member assignment and eligible member incentive payment(s).

#### Mammogram Facility Incentive Program instructions:

- Contracted radiology facilities outreach to assigned, eligible members to schedule and conduct the assigned member's mammogram between April 1, 2025, and Dec. 31, 2025.
- 2 Upon completion of the assigned, eligible member's mammogram, contracted radiology facilities document in the member's medical record and submit claims, encounter files, and/or approved National Committee for Quality Assurance (NCQA) supplemental electronic flat files containing all relevant and appropriate diagnostic and procedure codes by Jan. 31, 2026.

#### **HEDIS Bonus Amounts**

HEDIS Measure	Amount Per Eligible Member Gap Closed
Breast Cancer Screening	\$50

<sup>1</sup>The Healthcare Effectiveness Data and Information Set (HEDIS\*) is a registered trademark of the National Committee for Quality Assurance (NCQA).



# **Payment Information**

All claims, encounter files, and/or approved NCQA supplemental electronic flat files containing all relevant and appropriate diagnostic and procedure codes must be submitted by Jan. 31, 2026. They will be used in determining an eligible member's compliance with the HEDIS Breast Cancer Screening requirement and subsequently, calculating the incentive payment, targeted for delivery in Q2 2026. *Please note that only screenings completed for assigned and eligible members April 1*, 2025, to Dec. 31, 2025, are reviewed for payment.

Refer to pages 3-6 for a list of Breast Cancer Screening (BCS-E) NCQA HEDIS measure codes to help facilitate gap closures.

### **Additional Conditions**

Additional conditions for eligibility to receive a bonus under the Mammogram Facility Incentive Program are:

- 1. All radiology facilities must: (a) be in a participation agreement with the Plan, either directly or indirectly through a participating physician group (PPG) or provider, from the effective date and continually through the dates the bonus payments are made, and (b) be in compliance with their participation agreement including the timely completion of required training or education as requested or required by the Plan.
- 2. Bonuses are paid to the eligible member's assigned contracted radiology facility of record at the end of the applicable measurement period as defined by the Mammogram Facility Incentive Program.
- 3. Any bonus payments earned through this Mammogram Facility Incentive Program will be in addition to the compensation arrangement set forth in your participation agreement, as well as any other Plan incentive program in which you may participate. At the Plan's discretion, contracted radiology facilities who have a contractual or other quality incentive arrangement with the Plan either directly or through a PPG/vendor may be excluded from participation in this program.
- 4. The terms and conditions of the participation agreement, except for appeal and dispute rights and processes, are incorporated into this program, including without limitation, all audit rights of the Plan and the contracted radiology facility agrees that the Plan or any state or federal agency may audit its records and information.

- 5. The program is discretionary and subject to modification due to changes in government health care program requirements, or otherwise. The Plan will determine if the requirements are satisfied and payments will be made solely at the Plan's discretion. There is no right to appeal any decision made in connection with the program. If the program is revised, the Plan will send a notice to contracted radiology facilities by email or other means of notice permitted under the participation agreement.
- 6. The Plan reserves the right to withhold the payment of any bonus that may have otherwise been paid to a contracted radiology facility to the extent that such contracted radiology facility has received or retained an overpayment (any money to which the contracted radiology facility is not entitled, including but not limited to fraud, waste or abuse) from the Plan or Plan's eligible member. In the event the Plan determines a contracted radiology facility has been overpaid, the Plan may offset any bonus payment that may have otherwise been paid to the contracted radiology facility against overpayment.
- 7. The Plan shall make no specific payment, directly or indirectly under a provider incentive program, to a contracted radiology facility as an inducement to reduce or limit medically necessary services to an enrollee and this Mammogram Facility Incentive Program does not contain provisions that provide incentives, monetary or otherwise, for withholding medically necessary care. All services should be rendered in accordance with professional medical standards.

(continued)

# **Breast Cancer Screening (BCS-E) NCQA HEDIS Measure Codes**

The Breast Cancer Screening measure has transitioned to exclusive use of the electronic clinical data systems reporting standard.

Refer to the list of codes below to help close the BCS-E care gap. Note, this list is subject to change.

Thank you for working to deliver quality health care to our members.

CPT         77062         Breast, mammography           CPT         77061         Breast, mammography           CPT         77066         Breast, mammography           CPT         77065         Breast, mammography           CPT         77063         Breast, mammography           CPT         77067         Breast, mammography           CPT         77067         Breast, mammography           COINC         86463-7         Digital breast tomosynthesis (DBT) - bilateral           LOINC         91519-9         DBT Breast - bilateral diagnostic           LOINC         91519-9         DBT Breast - bilateral screen for implant           LOINC         91522-3         DBT Breast - bilateral screen for implant           LOINC         91522-3         DBT Breast - bilateral screening           LOINC         9158-1         DBT Breast - left diagnostic           LOINC         91518-1         DBT Breast - left diagnostic for implant           LOINC         91521-5         DBT Breast - left screen for implant           LOINC         72141-5         DBT Breast - left screen for implant           LOINC         72157-3         DBT Breast - right diagnostic for implant           LOINC         91517-3         DBT Breast - right screening	Code System	Code <sup>2</sup>	Definition
CPT 77066 Breast, mammography CPT 77065 Breast, mammography CPT 77063 Breast, mammography CPT 77067 Breast, mammography CPT 77067 Breast, mammography LOINC 86463-7 Digital breast tomosynthesis (DBT) - bilateral LOINC 72139-9 DBT Breast - bilateral diagnostic LOINC 91519-9 DBT Breast - bilateral diagnostic for implant LOINC 91522-3 DBT Breast - bilateral screen for implant LOINC 72142-3 DBT Breast - bilateral screening LOINC 72138-1 DBT Breast - left diagnostic LOINC 91518-1 DBT Breast - left diagnostic for implant LOINC 91518-1 DBT Breast - left diagnostic for implant LOINC 9152-5 DBT Breast - left screening LOINC 72141-5 DBT Breast - left screening LOINC 72137-3 DBT Breast - right diagnostic LOINC 91517-3 DBT Breast - right diagnostic for implant LOINC 91520-7 DBT Breast - right screening LOINC 91520-7 DBT Breast - right screening LOINC 91540-7 DBT Breast - right screening LOINC 92140-7 DBT Breast - unilateral LOINC 93892-6 DBT Breast - unilateral LOINC 103892-6 DBT Breast - bilateral diagnostic LOINC 38090-7 Mammogram (MG) Breast - bilateral air gap views LOINC 26346-7 MG Breast - bilateral diagnostic for implant LOINC 46475-8 MG Breast - bilateral diagnostic limited views LOINC 46351-3 MG Breast - bilateral displacement views for implant LOINC 26287-3 MG Breast - bilateral magnification and spot	СРТ	77062	Breast, mammography
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LOINC 26287-3 MG Breast – bilateral limited views  LOINC 37554-3 MG Breast – bilateral magnification and spot	LOINC	26349-1	MG Breast – bilateral diagnostic limited views
LOINC 37554-3 MG Breast – bilateral magnification and spot	LOINC	46351-3	MG Breast – bilateral displacement views for implant
	LOINC	26287-3	MG Breast – bilateral limited views
LOINC 37543-6 MG Breast - hilateral magnification views	LOINC	37554-3	MG Breast – bilateral magnification and spot
57545 0 Mid breast - bitaterat magnification views	LOINC	37543-6	MG Breast – bilateral magnification views

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Code System	Code <sup>2</sup>	Definition
LOINC	37006-4	MG Breast – bilateral mediolateral oblique
LOINC	37016-3	MG Breast – bilateral rolled views
LOINC	26175-0	MG Breast – bilateral screening
LOINC	48492-3	MG Breast – bilateral screening for implant
LOINC	46335-6	MG Breast – bilateral single view
LOINC	37552-7	MG Breast – bilateral spot views
LOINC	37029-6	MG Breast – bilateral tangential
LOINC	37038-7	MG Breast – bilateral true lateral
LOINC	36626-0	MG Breast – bilateral views
LOINC	38071-7	MG Breast – bilateral views for implant
LOINC	42415-0	MG Breast – bilateral views post wire placement
LOINC	37052-8	MG Breast – bilateral XCCL
LOINC	36642-7	MG Breast – left two views
LOINC	38091-5	MG Breast – left air gap views
LOINC	26347-5	MG Breast – left diagnostic
LOINC	69150-1	MG Breast – left diagnostic for implant
LOINC	26350-9	MG Breast – left diagnostic limited views
LOINC	26289-9	MG Breast – left limited views
LOINC	37005-6	MG Breast – left magnification
LOINC	38854-6	MG Breast – left magnification and spot
LOINC	37017-1	MG Breast – left rolled views
LOINC	26176-8	MG Breast – left screening
LOINC	103885-0	MG Breast – left screening for implant
LOINC	46336-4	MG Breast – left single view
LOINC	37553-5	MG Breast – left spot views compression
LOINC	37030-4	MG Breast – left tangential
LOINC	38855-3	MG Breast – left true lateral
LOINC	36627-8	MG Breast – left views
LOINC	38072-5	MG Breast – left views for implant
LOINC	42416-8	MG Breast – left views post wire placement
LOINC	37053-6	MG Breast - left XCCL
LOINC	37768-9	MG Breast – right two views
LOINC	26348-3	MG Breast – right diagnostic
LOINC	69259-0	MG Breast – right diagnostic for implant
LOINC	26351-7	MG Breast – right diagnostic limited views
LOINC	26291-5	MG Breast – right limited views
LOINC	37773-9	MG Breast – right magnification

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Code System	Code <sup>2</sup>	Definition
LOINC	37769-7	MG Breast – right magnification and spot
LOINC	37775-4	MG Breast – right rolled views
LOINC	26177-6	MG Breast – right screening
LOINC	103886-8	MG Breast – right screening for implant
LOINC	46337-2	MG Breast – right single view
LOINC	38807-4	MG Breast – right spot views
LOINC	37770-5	MG Breast – right tangential
LOINC	37771-3	MG Breast – right true lateral
LOINC	37774-7	MG Breast – right views
LOINC	38820-7	MG Breast – right views for implant
LOINC	37772-1	MG Breast – right XCCL
LOINC	46350-5	MG Breast – unilateral diagnostic
LOINC	46356-2	MG Breast – unilateral screening
LOINC	46338-0	MG Breast – unilateral single view
LOINC	46339-8	MG Breast – unilateral views
LOINC	46380-2	MG Breast – unilateral views for implant
LOINC	36319-2	MG Breast four views
LOINC	36962-9	MG Breast axillary
LOINC	24605-8	MG Breast diagnostic
LOINC	103894-2	MG Breast diagnostic for implant
LOINC	24604-1	MG Breast diagnostic limited views
LOINC	37539-4	MG Breast grid views
LOINC	24610-8	MG Breast limited views
LOINC	37542-8	MG Breast magnification views
LOINC	24606-6	MG Breast screening
LOINC	103893-4	MG Breast screening for implant
LOINC	37551-9	MG Breast spot views
LOINC	37028-8	MG Breast tangential
LOINC	37037-9	MG Breast true lateral
LOINC	36625-2	MG Breast views
LOINC	38070-9	MG Breast views for implant
LOINC	69251-7	MG Breast views post wire placement
SNOMED CT US Edition	833310007	Contrast enhanced dual energy spectral mammography (procedure)
SNOMED CT US Edition	726551006	Contrast enhanced spectral mammography (procedure)
SNOMED CT US Edition	450566007	Digital breast tomosynthesis (procedure)

Code System	Code <sup>2</sup>	Definition
SNOMED CT US Edition	723780005	Digital tomosynthesis of bilateral breasts (procedure)
SNOMED CT US Edition	723779007	Digital tomosynthesis of left breast (procedure)
SNOMED CT US Edition	723778004	Digital tomosynthesis of right breast (procedure)
SNOMED CT US Edition	241055006	Mammogram – symptomatic (procedure)
SNOMED CT US Edition	241057003	Mammogram coned (procedure)
SNOMED CT US Edition	439324009	Mammogram in compression view (procedure)
SNOMED CT US Edition	241058008	Mammogram magnification (procedure)
SNOMED CT US Edition	71651007	Mammography (procedure)
SNOMED CT US Edition	866235004	Mammography of bilateral breast implants (procedure)
SNOMED CT US Edition	43204002	Mammography of bilateral breasts (procedure)
SNOMED CT US Edition	866234000	Mammography of breast implant (procedure)
SNOMED CT US Edition	572701000119102	Mammography of left breast (procedure)
SNOMED CT US Edition	866236003	Mammography of left breast implant (procedure)
SNOMED CT US Edition	566571000119105	Mammography of right breast (procedure)
SNOMED CT US Edition	866237007	Mammography of right breast implant (procedure)
SNOMED CT US Edition	24623002	Screening mammography (procedure)
SNOMED CT US Edition	384151000119104	Screening mammography of bilateral breasts (procedure)
SNOMED CT US Edition	392531000119105	Screening mammography of left breast (procedure)
SNOMED CT US Edition	392521000119107	Screening mammography of right breast (procedure)
SNOMED CT US Edition	258172002	Stereotactic mammography (procedure)
SNOMED CT US Edition	12389009	Xeromammography (procedure)