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Educational and coding information for providers

October 2018 | October is Breast Cancer Awareness Month

FOCUS ON: Breast cancer

Facts about breast cancer

More women are diagnosed with breast cancer than any other cancer (excluding skin cancer); one in eight women will develop breast cancer over a lifetime. Breast cancer is the second most common cause of death from cancer in the United States following lung cancer. Since 1989, thanks to early detection and improved treatments, the number of women who die from breast cancer has steadily declined. Currently in the United States there are approximately three million women living with breast cancer. Although rare, men are also at risk accounting for less than 1% of all breast cancers.[1] The risk of developing breast cancer increases as a woman ages, with most cancers developing in women older than 50. Mammography is an excellent screening tool for breast cancer.[2] Screening mammography is a Five-Star Quality measure from the Centers for Medicare & Medicaid Services (CMS) and also a Healthcare Effectiveness Data and Information Set (HEDIS) quality measure.[3]

Current cancer vs. history of cancer

To correctly report a diagnosis of cancer, determine whether the patient's cancer has been eradicated or is currently being treated. The neoplasm table in the ICD-10-CM code book establishes three categories of malignancy: primary, secondary and in situ. Malignant neoplasms should be coded as categorized; unknown sites (primary or secondary) must also be coded.

Patients with cancer who are receiving active treatment for the condition should be reported with the malignant neoplasm code corresponding to the affected site. This applies even when a patient has had cancer surgery, but is still receiving active treatment for the disease. Patients with a history of cancer, with no evidence of current cancer, and not currently under treatment for cancer should be reported as "Personal history of malignant neoplasm." These Z85 codes require additional characters to identify the site of the cancer and should be reported only when there is no evidence of current cancer. If a patient's presenting problem, signs, or symptoms may be related to the cancer history or if the cancer history impacts the plan of care, then report the appropriate Z code and not the code for the active cancer.

Documentation and coding tips

- Patients taking antineoplastic medications (for example, Tamoxifen, Femara) for treatment of breast cancer are coded to an active malignant neoplasm as long they are taking the medications[4]
- Use additional code to identify estrogen receptor status (Z17.0, Z17.1), and for Long term (current) use of anti-neoplastic medications (Z79.810, Z79.818)

Documentation should include the specific site of tumor and laterality (for example, right, left, bilateral).

C50.- Malignant neoplasm of breast

- 4th character identifies site: nipple/areola (0); quadrants (2-5); overlapping boundaries (8); unspecified (9)
- 5th character identifies sex: female (1); male (2)
- 6th character identifies laterality: right side (1); left side (2); unspecified (9)

Example of coding female breast cancer

- **C50.411** Malignant neoplasm of RUOQ of female breast
- **C50.919** Malignant neoplasm of unspecified site of unspecified female breast

Example of coding male breast cancer

- **C50.029** Malignant neoplasm of nipple/areola, unspecified male breast
- **C50.829** Malignant neoplasm of overlapping sites of unspecified male breast

History of breast cancer

- Z80.3 Family history of malignant neoplasm of breast
- Z85.3 Personal history of malignant neoplasm of breast

Breast cancer screening

- Z12.31 Encounter for screening mammogram for malignant neoplasm of breast

Coding example

A 68-year-old female seeing hematology-oncology for Stage IIA, ER+ breast cancer, RUOQ, previously removed by ultrasound-guided biopsy. Radiation therapy completed, currently on Femara.

- **C50.411** Malignant neoplasm of upper-outer quadrant of right female breast
- Z17.0 Estrogen receptor positive status [ER+]
- Z79.818 Long term (current) use of other agents affecting estrogen receptors and estrogen levels

Optum360 ICD-10-CM: Professional for Physicians 2018. Salt Lake City, UT: 2017.
1. Sollitto M. The 4 Most Common Age-Related Eye Diseases. Legal Documents To Make Healthcare Decisions for Elderly Parents - AgingCare.com. https://www.agingcare.com/articles/the-4-most-common-age-related-eye-diseases-145190.htm. Published December 22, 2017. Accessed August 17, 2018.
2. Macular degeneration. gstatic.com. https://www.gstatic.com/healthricherkp/pdf/macular_degeneration.pdf. Published September 11, 2017. Accessed August 17, 2018.
3. What Is Macular Degeneration? American Academy of Ophthalmology. https://www.aao.org/eye-health/diseases/amd-macular-degeneration. Published May 17, 2018. Accessed August 17, 2018.
4. AHA Coding Clinic for ICD, 4th Quarter. Vol 25, No 4, 2008, p. 156