

Breast Cancer

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Overview

The breast cancer condition identifies women only age 18 – 75 years at the end of the report period, and consists of two sections, part 1 and part 2. **Part 1 (Case ID = 103800)** is built as a chronic condition and addresses issues of follow-up care for any patient who is being treated for breast cancer or who has a history of breast cancer. **Part 2 (Case ID = 200700)** is built as a single episodic condition, which identifies new cases of breast cancer and addresses issues of treatment for new cases.

Part 1: Breast Cancer as Chronic Condition Case ID 103800

Care Pattern

CP-I

9000003 Patient(s) that had an annual physician visit.

An annual history and physical examination, at minimum, is recommended for all patients with breast cancer (1-4).

1. *Khatcheressian JL, Wolf ACf, Smith TJ, Grunfeld E, Muss HB, et.al. American Society of Clinical Oncology 2006 Update of the Breast Cancer Follow-Up and Management Guidelines in the Adjuvant Setting. J Clin Oncol 2006;24(31):1-7.*
2. *NIH Consensus Conference. Treatment of early-stage breast cancer. JAMA 1991;265:391-395.*
3. *Del Turco MR et al. Intensive diagnostic follow-up after treatment of primary breast cancer: a randomized trial. JAMA 1994;271:1593-1597.*
4. *GIVIO Investigators. Impact of follow-up testing on survival and health-related quality of life in breast cancer patients. JAMA 1994;271:1587-1592.*

Part 2: Breast Cancer As New Episode Case ID 200700

CP-I

9000001 Patient(s) newly diagnosed with breast cancer that received radiation or chemotherapy treatment or had medical oncology or radiation oncology consultation within 120 days of the diagnostic procedure.

The consensus opinion of experts was the primary source of our recommendation that a medical or radiation oncologist evaluate a patient with a new diagnosis of breast cancer within 6 months of diagnosis, at minimum. If a patient received chemotherapy or radiation, it is assumed that this specialty care was provided. The purpose of this measure is to identify women with a new diagnosis of breast cancer who received radiation or chemotherapy treatment or had specialty consultation with a medical or radiation oncologist within 120 days of the breast cancer diagnostic procedure.

This measure will apply only to women with a new diagnosis of breast cancer. A woman was identified as having a new diagnosis of breast cancer when the following criteria were met: 1) a breast cancer diagnostic procedure, 2) an anterior clear window without a breast cancer encounter 45-365 days prior to the breast cancer diagnostic procedure claim (suggesting no previous diagnosis of breast cancer), and 3) an encounter for breast cancer during the time period 44 days before the breast cancer diagnostic procedure through 90 days after this procedure (confirming a diagnosis of breast cancer after the diagnostic procedure). A potential limitation of this measure is that it may identify a woman with recurrent breast cancer instead of a new diagnosis of breast cancer. Given limitations of claims data, it is otherwise difficult to clearly identify women with a new diagnosis of breast cancer.

Potential treatment options should be reviewed with the patient. Consideration needs to be given to the

resources that may be needed based on the clinical situation. A medical oncologist can assist with the following: review predicted risk of recurrence, provide patient education about risks and benefits of chemotherapy and adjuvant therapy, determine need for adjuvant therapy, and coordinate all therapeutic plans. A medical oncologist can administer chemotherapy and adjuvant therapy. A radiation oncologist can provide information about the risks and benefits of radiation therapy (XRT) and coordinate XRT.