

# ASPS Recommended Insurance Coverage Criteria for Third-Party Payers

## Skin Lesions

### BACKGROUND

A skin lesion is any alteration in normal skin architecture. There are many different kinds of skin lesions: benign, pre-malignant and malignant, which can occur on any site throughout the body. Unfortunately, it is not always possible to clinically differentiate a skin lesion into one of these categories.

### DEFINITION: COSMETIC AND RECONSTRUCTIVE SURGERY

For reference, the following definitions of cosmetic and reconstructive surgery were adopted by the American Medical Association in 1989:

*Cosmetic* surgery is performed to reshape normal structures of the body in order to improve the patient's appearance and self-esteem.

*Reconstructive* surgery is performed on abnormal structures of the body, caused by congenital defects, developmental abnormalities, trauma, infection, tumors or disease. It is generally performed to improve function, but may also be done to approximate a normal appearance.

### DEFINITIONS: LESIONS

#### Benign Lesions

There are a many types of benign skin lesions and the diagnoses can often be made by clinical examination. Those lesions for which the diagnoses are uncertain may require incisional or excisional biopsy.

#### Pre-malignant Lesions

A pre-malignant lesion, given time, may become malignant. Examples of pre-malignant lesions include dysplastic nevi, giant congenital nevi, nevus sebaceous, and actinic keratosis.

#### Malignant Lesions

The three most common malignancies seen are basal cell carcinoma, squamous cell carcinoma and melanoma. Other rare cutaneous and subcutaneous malignancies are also seen.

### POLICY

Removal of a skin lesion(s) is considered reconstructive surgery and medically necessary when one of the following diagnoses or conditions are present:

### Diagnosis

Diagnosis	ICD-9
A. Melanoma Malignant melanoma of skin	172.0-172.9
B. Other malignant neoplasm of skin (i.e. basal cell and squamous cell carcinoma)	173.0-173.9
C. Carcinoma in situ of the skin	232.0-232.7
D. Benign lesions of the skin	
1. Lipoma	214.0-214.9
2. Benign neoplasm of skin	216.0-216.9
3. Hemangioma and lymphangioma, any site	228.0-228.1
4. Sebaceous cysts	706.2
E. (Skin) neoplasms of uncertain behavior	238.2
F. Actinic keratoses	702.0
G. Changing lesions, including:	782.9
1. Enlarging or changing colors	
2. Dyschromia (abnormal pigmentation of skin)	
3. Obstructing an orifice	
4. Restricting vision	
5. Chronically irritated with evidence of:	
• inflammation	
• purulence	
• oozing	
• edema	
• erythema	
H. Bleeding	459.0
I. Painful	782.0
J. Itching	698.9
K. History of:	
• previous skin malignancy or pre-malignancy	V10.82-3 V13.3
• previously infected lesion	V12.09
• previous exposure to radiation i.e., therapeutic or sun exposure, sunburn, or tanning salons	V15.3
• family history of skin malignancy	V16.8
• Removed for cosmetic reasons but the pathologic exam shows malignancy or pre-malignancy	

<b><u>Procedure</u></b>	<b><u>CPT Code</u></b>	<b><u>References</u></b>
A. Shaving for epidermal and dermal layers	11300-11313	1. McCarthy, J. <i>Plastic Surgery</i> . (8 vol). St. Louis: Mosby, 1989.
B. Excision and simple closure, benign lesions	11400-11446	2. Cruse, C.W. and D. Reintgen. Treatment of primary malignant melanoma: A review. <i>Sem Surg Onc</i> . 9:215-218, 1993.
C. Excision, malignant lesions	11600-11646	3. Eshima, I. Role of plastic surgery in the treatment of malignant melanoma. <i>Surg Clin North Amer</i> . 26:1331-1342, 1996.
D. Repair, intermediate, layer closure wounds	12031-12057	4. Karagas, M.R. et. al. Use of tanning devices and risk of basal cell and squamous cell skin cancers. <i>J Natl Cancer Inst</i> . 94:224-6, 2002.
E. Repair, complex wound closure	13100-13153	5. Goldberg, D.P. Assessment and surgical treatment of basal cell skin cancer. <i>Clin Plast Surg</i> . 24:673-86, 1997.
F. Adjacent tissue transfer or rearrangement	14000-14061	6. Thompson, H.G. Common benign pediatric cutaneous tumors: timing and treatment. <i>Clin Plast Surg</i> . 17:49-64, 1990.
G. Split thickness skin graft	15050-15121	7. Morganroth, G.S. and D. J. Leffell. Non-excisional treatment of benign and premalignant cutaneous lesions. <i>Clin Plast Surg</i> . 20:91-104, 1993.
H. Full thickness skin graft	15200-15261	8. Graham, G.F. Cryosurgery. <i>Clin Plast Surg</i> . 20:131-146, 1993.
I. Destruction of benign or premalignant lesions by any method, including laser, with or without surgical curettage	17000, 17003-4	9. Casson, P. and S. Colen. Dysplastic and congenital nevi. <i>Clin Plast Surg</i> . 20:105-11; discussion 111-13, 1993.
J. Excision, lymph nodes and lymphatic channels	38500-38542	
K. Cervical lymphadenectomy	38700-38724	
L. Axillary lymphadenectomy;	38740-38745	
M. Inguinofemoral lymphadenectomy	38760-38765	
N. Injection procedure; for identification of sentinel node	38792	

This coding is provided as a guideline for the physician and is not meant to be exclusive of other possible codes. Other codes may be acceptable depending on the nature of any given procedure.

Approved by the ASPS® Executive Committee, March 2003.

