

ASPS Recommended Insurance Coverage Criteria for Third-Party Payers

Reconstruction after Prophylactic Mastectomy

BACKGROUND

Overall, women in the U.S. have a 12.5% lifetime risk of developing breast cancer, and a 3.5% lifetime risk of dying from the disease.¹ Certain women fall into high risk groups in which cancer incidence is markedly increased. This includes women with a family history of breast cancer in first and second-degree relatives or those who carry certain genetic mutations. Patients with BRCA1 or BRCA2 mutations as well as those with p53, PTEN or CHD-1 mutations have a significantly elevated lifetime risk of developing breast cancer, estimated between 60-90%.² Patients who have had breast cancer at an early age (< 40 years) have an increased lifetime risk of developing breast cancer in the opposite breast. These patients may seek a prophylactic mastectomy which carries a risk reduction of greater than 90% in high risk women with or without the BRCA1 or BRCA2 gene.^{3,4} Other groups of women at high risk include those with atypical hyperplasia and fibrocystic breast disease and pathologic findings showing diffuse microcalcifications, lobular carcinoma in situ (LCIS).

Though extremely rare, male breast cancer does occur. Males who have had breast cancer, particularly those with a family history of the disease, may want to consider prophylactic treatment.

Since 1998, federal law has mandated insurance coverage for breast reconstruction and includes procedures to restore and achieve symmetry on the opposite breast.

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.

DEFINITION: PROPHYLACTIC MASTECTOMY

Prophylactic mastectomy is the surgical removal of the breast to prevent the occurrence or reoccurrence of cancer.

POLICY

Prophylactic mastectomy and subsequent breast reconstruction are considered reconstructive surgery and medically necessary when one of the following diagnoses or conditions are present:

<u>Diagnosis</u>	<u>ICD-10</u>
A. Family history of malignant neoplasm of breast	Z80.3
B. Personal history of malignant neoplasm of breast	Z85.3
Personal history of irradiation	Z92.3
C. Genetic susceptibility to malignant neoplasm of breast	Z15.01
D. Fibrocystic breast disease	
Unspecified	N60.19
Left Breast	N60.12
Right Breast	N60.11
E. Malignant neoplasm of female breast	
Overlapping sites of unspecified female breast	C50.819
Neoplasm of overlapping sites of right female breast	C50.811
Neoplasm of overlapping sites of left female breast	C50.812
Unspecified site of right female breast	C50.911
Unspecified site of left female breast	C50.912
Neoplasm of axillary tail of right female breast	C50.611
Neoplasm of axillary tail of left female breast	C50.612
Neoplasm of axillary tail of unspecified breast	C50.619
Neoplasm of central portion of right female breast	C50.111
Neoplasm of central portion of left female breast	C50.112
Neoplasm of central portion of unspecified breast	C50.119
F. Malignant neoplasm of male breast	
Neoplasm of unspecified site of right male breast	C50.921
Neoplasm of unspecified site of left male breast	C50.922
Neoplasm of unspecified site of unspecified male breast	C50.929
Neoplasm of overlapping sites of unspecified breast	C50.829
Neoplasm of overlapping sites of right male breast	C50.821
Neoplasm of overlapping sites of left male breast	C50.822
Neoplasm of central portion of right male breast	C50.121
Neoplasm of central portion of left male breast	C50.122
Neoplasm of central portion of unspecified male breast	C50.129
Neoplasm of axillary tail of right male breast	C50.621
Neoplasm of axillary tail of left male breast	C50.622
Neoplasm of axillary tail of unspecified male breast	C50.629
G. Carcinoma in situ of the breast	
Intraductal carcinoma in situ of unspecified breast	D05.10
Intraductal carcinoma in situ of right breast	D05.11
Intraductal carcinoma of left breast	D05.12
Lobular carcinoma in situ of unspecified breast	D05.00
Lobular carcinoma in situ of right breast	D05.01
Lobular carcinoma in situ of left breast	D05.02
Unspecified type of carcinoma in situ of unspecified breast	D05.90
Unspecified type of carcinoma in situ of right breast	D05.91
Unspecified type of carcinoma in situ of left breast	D05.92
H. Neoplasm of uncertain behavior of Breast	
Neoplasm of uncertain behavior of unspecified breast	D48.60
Neoplasm of uncertain behavior of right breast	D48.61
Neoplasm of uncertain behavior of left breast	D48.62

Procedure	CPT Code
A. Breast Reconstruction, immediate or delayed, with tissue expander	19357
B. Breast reconstruction with latissimus dorsi flap	19357
C. Breast reconstruction w/Free Flap	19364
D. Breast reconstruction w/other technique	19366
E. Breast reconstruction with TRAM, single pedicle	19367
F. Breast reconstruction w/TRAM, single pedicle, with supercharging	19368
G. Breast reconstruction w/TRAM, double pedicle	19369
H. Immediate insertion of breast prosthesis	19340
I. Delayed insertion of breast prosthesis	19342
J. Nipple/areola reconstruction	19350
K. Grafting of autologous fat harvested by liposuction technique to trunk, breasts , scalp, arms, and or legs; 50 cc or less injectate	15771
L. Each additional 50 cc injectate, or part thereof (List separately in addition to code for primary procedure)	15772
M. Implantation of biologic implant (eg, acellur dermal matrix) for soft tissue reinforcement	15777
N. Reconstruction with tissue expander, immediate or delayed	19357
O. Reconstruction via flaps, breast reconstruction with latissimus dorsi flap, without prosthetic implant	19361
P. Reconstruction via flaps, breast reconstruction with free flaps (DIEP, SIEA, TUG)	19364
Q. Other technique, breast reconstruction with other techniques	19366
R. Revision of reconstructed breast	19380

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.

References

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