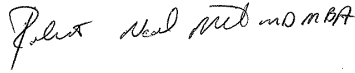


Origination Date: 11/98	Revision Date(s): 08/00, 09/01, 11/03, 11/04, 12/05, 12/06, 10/07, 10/08, 7/10, 7/11
Developed By: Medical Criteria Committee	



**Approved:** Neal Mills MD. MBA

**Date:** 06/23/11

**Description:**

Reconstructive breast surgery is performed following a mastectomy, lumpectomy or prophylactic mastectomy for high-risk patients to re-establish symmetry between the two breasts. It includes reconstruction of the mastectomy site, creation of a new breast mound and creation of a new areolar complex following removal of a breast. It also includes reconstruction of a non-diseased breast to achieve symmetry.

**Policy for Reconstructive Surgery after Medically Necessary Mastectomy or Medically Necessary Lumpectomy that Results in a Significant Deformity:**

In accordance with the Women's Health and Cancer Act of 1998 ODS will benefit:

1. The original reconstruction of the breast, including the areolar complex, on which the mastectomy was performed
2. The surgery and reconstruction of the opposite breast to achieve a symmetrical appearance
3. Prostheses and physical complications at all stages of the original mastectomy including all lymphedemas
4. Inpatient care related to the mastectomy and post-mastectomy services

**Policy Guidelines:**

Requests for additional reconstructive surgery (for either site) after the original reconstruction(s) have been completed are subject to review for medical necessity. If medical necessity is met for additional surgery per the criteria below, re-implantation of implant(s) will also be benefited. Surgery for which medical necessity cannot be established is considered cosmetic and is not covered by the plan.

**Criteria for Additional Surgical Requests after the Original Reconstructive Surgery has been Completed (See also the ODS Breast Implant Removal criteria)**

The following criteria must be met:

1. Documentation of one of the following:
  - a. Infection at the implant/reconstruction site
  - b. Documentation of ongoing pain or painful contractures related to the implant/reconstruction site for the past 6 months
  - c. Extruded implant
  - d. Documented intra- or extra-capsular leakage

**Information to be Submitted with Pre-Authorization Request:**

Clinical records from the treating physician for the past 12 months to include:

- Original diagnosis and date of mastectomy
- Phases of reconstructive surgery and completion dates
- Documentation of pain, contractures, complications or reconstruction, etc.

Origination Date: 11/98	Revision Date(s): 08/00, 09/01, 11/03, 11/04, 12/05, 12/06, 10/07, 10/08, 7/10, 7/11
Developed By: Medical Criteria Committee	

**CPT Coding and Billing Information**  
**These codes may not be all inclusive**

<b>Codes</b>	<b>Descriptions</b>
11920	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation; 6.0 sq cm or less
11921	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation; 6.1 to 20.0 sq cm
11970	Replacement of tissue expander with permanent prosthesis
11971	Removal of tissue expander(s) without insertion of prosthesis
13100	Repair, complex, trunk; 1.1 cm to 2.5 cm
13101	Repair, complex, trunk; 2.6 cm to 7.5 cm
13102	Repair, complex, trunk; each additional 5 cm or less (List separately in addition to code for primary procedure)
15330	Acellular dermal allograft, trunk, arms, legs; first 100 sq cm or less, or 1% of body area of infants and children
15331	Acellular dermal allograft, trunk, arms, legs; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)
15340	Acellular xenograft implant; first 100 sq cm or less, or 1% of body area of infants and children
15341	Acellular xenograft implant; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)
19316	Mastopexy
19318	Reduction mammoplasty
19324	Mammoplasty, augmentation; without prosthetic implant
19325	Mammoplasty, augmentation; with prosthetic implant
19328	Removal of intact mammary implant
19330	Removal of mammary implant material
19340	Immediate insertion of breast prosthesis following mastopexy, mastectomy or in reconstruction
19342	Delayed insertion of breast prosthesis following mastopexy, mastectomy or in reconstruction
19350	Nipple/areola reconstruction
19357	Breast reconstruction, immediate or delayed, with tissue expander, including subsequent expansion
19361	Breast reconstruction with latissimus dorsi flap, without prosthetic implant
19364	Breast reconstruction with free flap
19366	Breast reconstruction with other technique
19367	Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), single pedicle, including closure of donor site
19368	Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), single pedicle, including closure of donor site; with microvascular anastomosis (supercharging)
19369	Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), double pedicle, including closure of donor site
19370	Open periprosthetic capsulotomy, breast
19371	Periprosthetic capsulectomy, breast
19380	Revision of reconstructed breast

Origination Date: 11/98	Revision Date(s): 08/00, 09/01, 11/03, 11/04, 12/05, 12/06, 10/07, 10/08, 7/10, 7/11
Developed By: Medical Criteria Committee	

C1789	Prosthesis, breast (implantable)
L8600	Implantable breast prosthesis, silicone or equal
Q4100	Skin substitute, not otherwise specified
Q4116	Skin substitute, alloderm, per square centimeter (Effective 07/01/2009)
S2066	Breast reconstruction with gluteal artery perforator (GAP) flap, including harvesting of the flap, microvascular transfer, closure of donor site and shaping the flap into a breast, unilateral
S2067	Breast reconstruction of a single breast with "stacked" deep inferior epigastric perforator (DIEP) flap(s) and/or gluteal artery perforator (GAP) flap(s), including harvesting of the flap(s), microvascular transfer, closure of donor site(s) and shaping the flap into a breast, unilateral
S2068	Breast reconstruction with deep inferior epigastric perforator (DIEP) flap or superficial inferior epigastric artery (SIEA) flap, including harvesting of the flap, microvascular transfer, closure of donor site and shaping the flap into a breast, unilateral

**References:**

- Alderman AK, Kuzon WM Jr, Wilkins EG. A two-year prospective analysis of trunk function in TRAM breast reconstructions. *Plast Reconstr Surg.* 2006 Jun;117(7):2131–8.
- American Cancer Society (ACS): Breast reconstruction after mastectomy. Updated September 1, 2009. Accessed July 21, 2011 at: <http://www.cancer.org/Cancer/BreastCancer/MoreInformation/BreastReconstructionAfterMastectomy/breast-reconstruction-after-mastectomy-toc>
- American Society of Plastic Surgeons (ASPS). Guiding principals: Fat Transfer/Fat Graft and Fat Injection. Accessed July 21, 2011 at: [http://www.plasticsurgery.org/Documents/Medical\\_Professionals/Health\\_Policy/guiding\\_principles/ASPS-Fat-Transfer-Graft-Guiding-Principles.pdf](http://www.plasticsurgery.org/Documents/Medical_Professionals/Health_Policy/guiding_principles/ASPS-Fat-Transfer-Graft-Guiding-Principles.pdf)
- Bajaj AK, Chevray PM, Chang DW. Comparison of donor-site complications and functional outcomes in free muscle-sparing TRAM flap and free DIEP flap breast reconstruction. *Plast Reconstr Surg.* 2006 Mar;117(3):737–46; discussion 747–50.
- Becker S, Saint-Cyr M, Wong C, Dauwe P, Nagarkar P, Thornton JF, Peng Y. AlloDerm versus DermaMatrix in immediate expander-based breast reconstruction: a preliminary comparison of complication profiles and material compliance. *Plast Reconstr Surg.* 2009 Jan;123(1):1-6; discussion 107-8.
- Centers for Medicare & Medicaid Services (CMS). The Women’s Health and Cancer Rights Act. Accessed July 21, 2011 at: <http://www.cms.hhs.gov/HealthInsReformforConsume/>
- Chan CW, McCulley SJ, Macmillan RD. Autologous fat transfer--a review of the literature with a focus on breast cancer surgery. *J Plast Reconstr Aesthet Surg.* 2008 Dec;61(12):1438-48. Epub 2008 Oct 9. Review.
- Chevray PM. Breast reconstruction with superficial inferior epigastric artery flaps: a prospective comparison with TRAM and DIEP flaps. *Plast Reconstr Surg.* 2004 Oct;114(5):1077–83; discussion 1084–5.
- Deutsch MF, Robb GL, Talavera F, Shenaq SM, Slenkovich N, Aly A. Breast Reconstruction, Other Free Flaps. Updated October 16, 2008. Accessed July 22, 2010. Available at URL address: <http://www.emedicine.com/plastic/topic140.htm>
- Deutsch MF, Robb GL, Talavera F, Shenaq SM, Slenkovich N, Aly A. Breast Reconstruction, Refinements & Finishing Touches. Updated October 16, 2008. Accessed July 21, 2011 at:

Origination Date: 11/98	Revision Date(s): 08/00, 09/01, 11/03, 11/04, 12/05, 12/06, 10/07, 10/08, 7/10, 7/11
Developed By: Medical Criteria Committee	

<http://www.emedicine.com/plastic/topic135.htm>

- Diana M, Robb GL, Talavera F, Shenaq SM, Slenkovich N. Breast Reconstruction, Nipple-Areola Reconstruction. Updated August 20, 2009. Accessed July 21, 2011 at: <http://www.emedicine.com/plastic/topic144.htm>
- Edlich RF, Winters KL, Faulkner BC, et al. Advances in breast reconstruction after mastectomy. J Long Term Eff Med Implants. 2005;15(2):197-207.
- ERISA, 1974: Title IX—Women’s Health and Cancer Rights Act, Omnibus Appropriations
- Fischbacher C. Immediate versus delayed breast reconstruction. STEER: Succint and Timely Evaluated Evidence Reviews. Bazian, Ltd., eds. London, UK: Wessex Institute for Health Research and Development, University of Southampton; 2002; 2(17):1-18.
- Hu E, Alderman AK. Breast reconstruction. Surg Clin North Am. 2007 Apr;87(2):453-67, x.
- Hyakusoku H, Ogawa R, Ono S, et al. Complications after autologous fat injection to the breast. Plast Reconstr Surg. 2009;123(1):360-370; discussion 371-372.
- Javaid M, Song F, Leinster S, et al. Radiation effects on the cosmetic outcomes of immediate and delayed autologous breast reconstruction: An argument about timing. J Plast Reconstr Aesthet Surg. 2006;59(1):16-26.
- Losken A, Carolson GW, Bostwick J III, Jones GE, Culbertson JH, Schoemann M. Trends in unilateral breast reconstruction and management of the contralateral breast: the Emory experience. Plast Reconstr Surg. 2002 Jul;110(1):89–97.
- Losken A, Hamdi M. Partial breast reconstruction: Current perspectives. Plast Reconstr Surg. 2009;124(3):722-736.
- Losken A, Hamdi M. Partial breast reconstruction: Current perspectives. Plast Reconstr Surg. 2009;124(3):722-736.
- Mizuno H, Hyakusoku H. Fat grafting to the breast and adipose-derived stem cells: Recent scientific consensus and controversy. Aesthet Surg J. 2010;30(3):381-387.
- National Comprehensive Cancer Network (NCCN). NCCN® practice guidelines in oncology. Breast Cancer. V.2.2010. Accessed July 21, 2011 at: [http://www.nccn.org/professionals/physician\\_gls/f\\_guidelines.asp](http://www.nccn.org/professionals/physician_gls/f_guidelines.asp)
- National Library of Medicine. Breast Reconstruction. Reviewed April 7, 2010. Accessed July 22, 2010. Available at URL address: <http://www.nlm.nih.gov/medlineplus/breastreconstruction.html>
- ORA: JL E 59E, Department of Health & Human Services, Clarification of the Women’s Health and Cancer Right Act per Richard Brummel, Deputy Regional Administrator
- U.S. Department of Labor (DOL). Your Rights After A Mastectomy. Women’s Health & Cancer Rights Act of 1998. Accessed July 21, 2011 at: <http://www.dol.gov/ebsa/publications/whcra.html>
- U.S. Food and Drug Administration (FDA). Breast implants. Updated 2005 Dec. Accessed July 21, 2011 at: <http://www.fda.gov/cdrh/breastimplants/>
- Physician Advisors