

2025 Breast Surgery

Surgical Services

SURG-BREAST-HH
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Breast Biopsy, Excisional

Breast Excisional Biopsy Guideline

An excisional biopsy of the breast in an adult is considered medically appropriate when the documentation demonstrates **ANY** of the following:

1. Incisional biopsy was previously done with **ANY** of the following:
 - a. Atypical hyperplasia (ductal or lobular) **OR** lobular carcinoma in-situ (LCIS) is present on core biopsy.
 - b. Core needle biopsy in past demonstrated a benign lesion that now has suspicious interval changes.
 - c. Core needle biopsy is non-diagnostic (eg, highly suspicious of cancer, insufficient material, lack of calcifications or hemorrhage).
 - d. Discordance between imaging characteristics (eg, mammogram, MRI, ultrasound) and core biopsy histology.
 - e. Fibro epithelial lesion (fibro adenoma vs. benign phyllodes tumor) is present on core biopsy.
 - f. Papillary and/or sclerosing lesion is present on core biopsy.
 - g. Radial scar is present on a core needle biopsy.
2. **NO** prior incisional biopsy and **ANY** of the following:
 - a. Anatomically unsuitable for biopsy (eg, breast tissue too thin, individual too large for biopsy table).
 - b. Cystic breast mass is unresolved after one or more drainage attempts.
 - c. Lesion is not anatomically suitable for core biopsy (eg, lesion too far anterior or posterior, or too close to breast implant).
 - d. Nipple discharge is suspicious (eg, spontaneous, clear, bloody, or serosanguineous) with normal breast imaging.

References: [20] [8] [21] [16] [13] [11] [4]

Breast Excisional Biopsy Procedure Codes

Table 1. Excisional Breast Biopsy Associated Procedure Codes

CODE	DESCRIPTION
19120	Excision of cyst, fibroadenoma, or other benign or malignant tumor, aberrant breast tissue, duct lesion, nipple or areolar lesion (except 19300), open, male or female, 1 or more lesions
19125	Excision of breast lesion identified by preoperative placement of radiological marker, open; single lesion
19126	Excision of breast lesion identified by preoperative placement of radiological marker, open; each additional lesion separately identified by a preoperative radiological marker (List separately in addition to code for primary procedure)

Breast Excisional Biopsy Summary of Changes

Breast Excisional Biopsy guideline in 2025 had the following changes:

- Added examples to "Discordance between imaging characteristics"
- Citations updated per the evidence
- Removed contraindications section as no longer supported by evidence

Breast Lumpectomy Contraindications

A breast lumpectomy may be contraindicated if the medical record demonstrates **ANY** of the following:

1. Genetic predisposition to breast cancer is suspected or known with **ANY** of the following:
 - a. Homozygous ATM mutation
 - b. Prophylactic bilateral mastectomy for risk reduction is being considered
 - c. Risk is increased with **ANY** of the following:
 - i. Contralateral breast cancer
 - ii. Ipsilateral breast recurrence
2. Inflammatory breast cancer or invasive breast cancer with dermal lymphatic involvement or extensive skin involvement.
3. Mammographic micro-calcifications that are diffuse and appear malignant, suggesting multicentricity.
4. Multi-centric disease with two or more primary tumors in separate breast quadrants.
5. Pregnancy, (although it may be possible to perform breast-conserving surgery in the third trimester, deferring breast RT until after delivery).

6. Radiation therapy to breast or chest wall received previously.
7. Resection margin is persistently positive after reasonable re-excision attempts.

References: [14] [11]

Breast Lumpectomy

Breast Lumpectomy Guideline

A breast lumpectomy in an adult is considered medically appropriate when the documentation demonstrates confirmed breast cancer, for **ANY** the following:

1. Initial lumpectomy with **ANY** of the following:
 - a. Core biopsy is positive for malignancy.
 - b. Ductal carcinoma in situ (DCIS).
 - c. Early-stage breast cancer (clinical stage I or II).
 - d. Invasive lobular carcinomas and tumors with a significant intraductal component, if clear margins can be achieved.
 - e. Tumor, regardless of size, can be excised with clear margins and an acceptable cosmetic result.
2. Repeat lumpectomy when there is margin clearance of less than 2 mm to same site as previous lumpectomy.

References: [13] [7] [1] [17] [11]

Breast Lumpectomy Procedure Codes

Table 1. Breast Lumpectomy Associated Procedure Codes

CODE	DESCRIPTION
19301	Mastectomy, partial (eg, lumpectomy, tylectomy, quadrantectomy, segmentectomy);
19302	Mastectomy, partial (eg, lumpectomy, tylectomy, quadrantectomy, segmentectomy); with axillary lymphadenectomy

Breast Lumpectomy Summary of Changes

Breast Lumpectomy guideline in 2025 had the following changes:

- Added "Homozygous ATM mutation" to the contraindications section per current evidence
- Added "Inflammatory breast cancer or invasive breast cancer with dermal lymphatic involvement or extensive skin involvement" to contraindication section per current evidence

- Citations updated per the evidence
- Removed "Connective tissue disease involving the skin (eg, Lupus, Scleroderma, Sjögren syndrome) is active" from contraindications as no longer considered an absolute contraindication
- Removed "Li-Fraumeni syndrome" from contraindications as no longer considered an absolute contraindication

Mastectomy

Mastectomy Guideline



NOTICE

Requests for mastectomy as part of gender-reassignment are determined by the individual's health plan. Please refer to the Medical Policy of the individual's health plan for the indications associated with gender-reassignment procedures.

A mastectomy in an adult is considered medically appropriate when the documentation demonstrates **ANY** of the following:

1. Breast cancer diagnosis is known and curative mastectomy in affected, cancerous breast.
References: [11] [3] [7] [15] [13]
2. Gynecomastia for **ANY** of the following:
 - a. Klinefelter syndrome
 - b. Pain or tenderness, persistent, secondary to the breast tissue and **ALL** of the following:
 - i. Age is 18 years or older, or growth is complete.
 - ii. **ANY** of the following:
 - A. Clinical symptoms persist greater than 3 to 4 months despite treatment for known underlying cause (eg, androgen deficiency, endocrine disorder, increased estrogen secretion).
 - B. Drug induced (eg, bicalutamide, cimetidine, human growth hormone, nifedipine) gynecomastia that does not resolve after 3 to 4 months of stopping medication.
 - C. Idiopathic gynecomastia persists greater than 6 months when hormonal or medical causes have been ruled out by labs (eg, beta

subunit human chorionic gonadotropin [HCG], estradiol, prolactin, thyroid function studies).

- iii. Clinically significant impact (eg, cosmesis, physical discomfort, stress) upon activities of daily living (eg, bathing, dressing).
- iv. Gynecomastia, grade III or IV **OR** abnormal breast development with redundancy.

References: [9] [12]

- 3. Prophylactic mastectomy (including contralateral) and **ANY** of the following:
 - a. Age is younger than 45 years when diagnosed with breast cancer.
 - b. Biopsy confirmed atypical hyperplasia of lobular or ductal origin, and/or lobular carcinoma in-situ (LCIS) with dense, fibronodular breasts that are clinically or mammographically difficult to evaluate.
 - c. BRCA-1 or BRCA-2 gene.
 - d. Ethnic populations with higher risk of mutations (eg, Ashkenazi Jewish descent) who have one or more relatives with breast, ovarian, or pancreatic cancer.
 - e. First degree relative (eg, child, parent, sibling) with breast cancer.
 - f. History of multiple primary or bilateral breast cancer.
 - g. History of radiation therapy to the chest before 30 years of age.
 - h. Pathological mutations of TP53 (Li Fraumeni syndrome), PTEN (Cowden syndrome), CDH1 (associated with hereditary diffuse gastric cancer), and/or PALB2.

References: [18] [11] [6] [3] [7] [19] [15] [13] [5]



LCD 35090

See also, **LCD 35090**: Cosmetic and Reconstructive Surgery at <https://www.cms.gov/medicare-coverage-database/search.aspx> if applicable to individual's healthplan membership.



LCD 38914

See also, **LCD 38914**: Cosmetic and Reconstructive Surgery at <https://www.cms.gov/medicare-coverage-database/search.aspx> if applicable to individual's healthplan membership.



LCD 39051

See also, **LCD 39051**: Cosmetic and Reconstructive Surgery at <https://www.cms.gov/medicare-coverage-database/search.aspx> if applicable to individual's healthplan membership.



LCD L39506

See also, **LCD L39506**: Cosmetic and Reconstructive Surgery at www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=39506 if applicable to individual's healthplan membership.

Mastectomy Procedure Codes

Table 1. Mastectomy Associated Procedure Codes

CODE	DESCRIPTION
19300	Mastectomy for gynecomastia
19303	Mastectomy, simple, complete
19305	Mastectomy, radical, including pectoral muscles, axillary lymph nodes
19306	Mastectomy, radical, including pectoral muscles, axillary and internal mammary lymph nodes (Urban type operation)
19307	Mastectomy, modified radical, including axillary lymph nodes, with or without pectoralis minor muscle, but excluding pectoralis major muscle

Mastectomy Summary of Changes

Mastectomy guideline in 2025 had the following changes:

- Added "Biopsy confirmed atypical hyperplasia of lobular or ductal origin, and/or lobular carcinoma in-situ (LCIS) with dense, fibronodular breasts that are clinically or mammographically difficult to evaluate" under prophylactic mastectomy per current evidence
- Removed contraindication as no longer supported by evidence
- Updated "Gynecomastia, grade IIb through IV" to "Gynecomastia, grade III or IV" per current evidence
- Updated time frames under gynecomastia per current evidence

Breast Surgery Definitions

Androgen deficiency, also known as hypoandrogenism, is a condition where the body doesn't produce enough androgens, primarily testosterone, which are crucial for male sexual development and function. It can lead to various symptoms and, if severe, can impact overall health and well-being.

Atypical hyperplasia refers to a condition where cells in certain tissues, like the breast or uterus, are growing abnormally and appear distorted under a microscope, but are not cancerous. It's considered a pre-cancerous condition because it increases the risk of developing cancer in the future.

Beta subunit of human chorionic gonadotropin (beta-hCG) is a component of the hormone hCG, which is produced during pregnancy by the placenta. It's the specific part of the hCG molecule that gives it its unique biological activity, distinguishing it from other similar hormones like luteinizing hormone (LH). Beta-hCG is crucial for maintaining early pregnancy by supporting the corpus luteum and its production of progesterone. It's also a key marker used in diagnosing and monitoring pregnancy, as well as in the detection of certain types of tumors, particularly gestational trophoblastic disease.

Bilateral means affecting or involving both sides of the body or a paired organ.

BRCA gene (BRCA1 and BRCA2) are genes that normally help repair damaged DNA and prevent cancer development. Mutations in these genes can significantly increase the risk of breast, ovarian, prostate, and other cancers. Having a BRCA mutation doesn't guarantee cancer development, but it does mean a higher risk, especially for breast and ovarian cancers.

Breast Imaging Reporting and Data System (BI-RADS): The Breast Imaging Reporting and Data System lexicon was developed by the American College of Radiology to provide clear, concise way to report mammographic results.

A BI-RADS category is reported at the end of every mammogram report and summarizes the findings of the mammogram.

- BI-RADS 1: Normal mammography. The patient should return in 1 year for annual mammography;
- BI-RADS 2: Benign finding on mammography. The patient should return in 1 year for annual mammography;
- BI-RADS 3: There is a high likelihood of benignity (more than 98%). A short-term follow-up is recommended in 6 months. The follow-up is performed over a total of 2-3 years;
- BI-RADS 4: A biopsy is warranted: more than 2% but less than 95% likelihood of malignancy; BI-RADS
 - 4a: Low likelihood of malignancy;

- 4b: Intermediate likelihood of malignancy;
- 4c: Moderate likelihood of malignancy;
- BI-RADS 5: A biopsy is recommended. There is a high likelihood of malignancy (95% or more); BI-RADS
- BI-RADS 6: Confirmed malignancy.

Contralateral refers to the opposite side of the body or a structure. In anatomical and medical contexts, it's used to describe something that is located on the side opposite the reference point.

Core biopsy, also known as a core needle biopsy, is a medical procedure where a tissue sample is removed from the body using a hollow needle for examination under a microscope. This procedure is commonly used to investigate suspicious lumps or abnormalities detected through imaging tests like mammograms or ultrasounds. The tissue sample, which is a narrow cylinder (a "core"), helps doctors determine if a growth is cancerous and to understand its characteristics.

Cosmesis refers to the preservation, restoration, or enhancement of physical appearance, particularly in a medical or surgical context. It encompasses the aesthetic aspects of medical procedures, focusing on minimizing disfigurement and improving the cosmetic outcome of treatments or surgeries.

Cowden syndrome, also known as Cowden's disease or multiple hamartoma syndrome, is a rare genetic disorder characterized by multiple benign growths called hamartomas, along with an increased risk of certain cancers, particularly breast, thyroid, and endometrial cancers. It's an autosomal dominant disorder, meaning a child only needs to inherit one copy of the mutated gene to be affected.

Cystic breast mass is a breast lump that contains fluid-filled sacs or cysts. These cysts are typically noncancerous and can range in size from microscopic to several inches. They are a common finding, especially in premenopausal women, and are often part of a larger condition called fibrocystic breast disease.

Ductal carcinoma in-situ (DCIS) is a non-invasive breast cancer where abnormal cells are found in the milk ducts but have not spread beyond them. It's often considered the earliest form of breast cancer and is sometimes referred to as stage 0. While it doesn't typically cause symptoms, it's often detected through mammograms.

Endocrine disorder is a condition where the endocrine system, which produces and regulates hormones, isn't functioning properly. This can lead to hormone imbalances, either too much or too little of a specific hormone, or the body not responding to hormones effectively.

Estradiol is a major estrogen produced in the ovaries.

Excisional biopsy is a surgical procedure where a doctor removes an entire suspicious lump or lesion, along with a small amount of healthy tissue around it, for examination under a microscope. It differs from an incisional biopsy, where only a small portion of the lesion is removed for diagnosis.

Fibroadenoma is a benign (non-cancerous) breast tumor. It is a solid lump made up of both fibrous tissue and glandular tissue, and is one of the most common types of benign breast lumps. Fibroadenomas are often painless, firm, and mobile.

Fibroepithelial lesions are a group of breast tumors characterized by both stromal (connective tissue) and epithelial (glandular and ductal) components. They represent a spectrum of tumors, ranging from benign fibroadenomas to more complex phyllodes tumors, which can be benign, borderline, or malignant.

Gynecomastia is a condition in which there is an enlargement of the male breast tissue, resulting in an imbalance between estrogen and testosterone hormones. This enlargement can cause the breasts to appear larger and may be accompanied by tenderness or pain.

Hemorrhage is a medical term that refers to excessive bleeding. It occurs when a blood vessel is damaged, leading to the loss of blood from the body. Hemorrhage can be internal (inside the body) or external (outside the body).

Idiopathic gynecomastia is a condition characterized by the benign enlargement of male breast tissue where a specific cause cannot be identified after a thorough evaluation. It's essentially a diagnosis of exclusion, meaning that after ruling out other potential causes, such as hormonal imbalances, medications, or underlying medical conditions, gynecomastia is classified as idiopathic.

Incisional biopsy is a biopsy that removes only a portion of a larger lesion, and residual abnormal tissue remains.

Intraductal carcinoma refers to cancer cells found within the lining of a duct, but have not spread to surrounding tissue. It's a type of cancer that is confined to the ducts where it originated, such as milk ducts in the breast or prostatic ducts, and has not invaded surrounding areas.

Invasive carcinoma, also known as infiltrating carcinoma, is a type of cancer where cancerous cells have spread beyond their original location and are growing into surrounding healthy tissues. This means the cancer has moved beyond the tissue layer where it originated and is now invading nearby areas. Invasive carcinoma is different from in situ cancers, which remain confined to their original location.

Ipsilateral refers to the same side of the body as another structure or a given point.

Klinefelter syndrome is a genetic condition that affects males, characterized by an extra X chromosome. This results in a chromosomal makeup of XXY instead of the typical XY.

Li-Fraumeni syndrome (LFS) is a rare, inherited disorder that significantly increases the risk of developing various cancers, often at an early age. It is caused by mutations in the TP53 gene, which is a tumor suppressor gene. Individuals with LFS are predisposed to developing multiple cancers, including breast cancer, brain tumors, soft tissue sarcomas, osteosarcomas, and adrenal cortical carcinomas.

Lobular carcinoma in-situ (LCIS) refers to the presence of abnormal cells within the milk-producing glands (lobules) of the breast, but these cells have not spread beyond the lobules. It

is not considered breast cancer itself, but it does indicate an increased risk of developing breast cancer in the future.

Lumpectomy is a surgical procedure that involves removing a small portion of breast tissue, including the tumor and a margin of healthy tissue around it. It is a type of breast-conserving surgery used to treat early-stage breast cancer.

Lupus is a chronic autoimmune disease where the body's immune system mistakenly attacks its own healthy tissues and organs. This can lead to inflammation and damage in various parts of the body, including the skin, joints, blood, and organs like the kidneys, lungs, and heart. It's a complex condition with a range of symptoms that can vary widely from person to person.

Malignant is the presence of cancerous cells that have the ability to spread to other sites in the body (metastasize) or to invade nearby (locally) and destroy tissues. Malignant cells tend to have fast, uncontrolled growth and do not die normally due to changes in their genetic makeup.

Mantle field radiation, also known as mantle field radiotherapy, is a radiation therapy technique used to treat Hodgkin lymphoma (HL), particularly in the past. It involves directing radiation to a large area of the upper body, encompassing lymph nodes in the neck, chest, and armpits. This technique was commonly used to treat the lymph node regions above the diaphragm in patients with HL.

Mastectomy is a surgery that removes the entire breast.

Microcalcifications are tiny deposits of calcium that appear as small white dots on a mammogram. While they can be a sign of breast cancer, most microcalcifications are benign, meaning they are not cancerous. They are often an indicator of cell growth or changes in breast tissue.

Multicentricity refers to a condition where a disease, such as cancer, originates in several distinct locations within the same organ or body.

Papillary lesion is a growth that forms finger-like projections, often seen in various tissues and organs. These lesions can be either benign (non-cancerous) or malignant (cancerous), and they are characterized by their distinctive papillary (finger-like) structure. Examples include intraductal papillomas in the breast and papillary thyroid cancer.

Penetrance refers to the proportion of individuals with a specific genotype who exhibit the corresponding phenotype (observable trait). It essentially measures how frequently a gene's effect is manifested as a trait in a population. A high penetrance means most individuals with the gene will display the trait, while low penetrance indicates that many carriers will not.

Phyllodes tumor is a rare breast tumor that grows in the connective tissue of the breast. While most are benign, some can be malignant or borderline (between benign and malignant). They are characterized by their rapid growth and can sometimes grow large enough to bulge through the skin

Prolactin (also known as lactotropin and PRL) is a hormone that's responsible for lactation, certain breast tissue development and contributes to hundreds of other bodily processes. Prolactin

levels are normally low in people assigned male at birth (AMAB) and non-lactating and non-pregnant people.

Prophylactic refers to guarding from or preventing the spread or occurrence of disease or infection.

Radial scar also known as a complex sclerosing lesion, is a benign (non-cancerous) breast growth that appears like a scar under a microscope. While typically not harmful, they can sometimes mimic breast cancer on mammograms, requiring further investigation.

Resection margin, also known as a surgical margin, is the edge or border of tissue surrounding a tumor that has been surgically removed. In cancer surgery, the goal is to remove the tumor with a margin of healthy tissue to minimize the chance of residual cancer cells remaining. The pathologist examines this margin microscopically to determine if cancer cells are present.

Scleroderma is a chronic autoimmune disease characterized by the hardening and tightening of the skin and connective tissues. It can also affect internal organs. The term "scleroderma" literally means "hard skin" in Greek, reflecting the disease's primary symptom.

Sclerosing lesion is a benign (non-cancerous) area of hardened tissue, most commonly found in the breast. These lesions are characterized by an increase in fibrous tissue, which can make them feel firm or hard to the touch. While generally benign, some sclerosing lesions can be associated with an increased risk of breast cancer, particularly those with atypical cells.

Serosanguineous refers to a type of fluid that contains both serum (clear, watery liquid) and blood. It is typically a light pink to red color and may have a slightly watery consistency.

Sjögren syndrome is a chronic autoimmune disease where the body's immune system mistakenly attacks its own moisture-producing glands, primarily the tear and salivary glands. This leads to dryness in the eyes (dry eyes) and mouth (dry mouth). It can also affect other parts of the body, including the skin, nose, throat, and even internal organs.

Thyroid function tests (TFTs) are a series of blood tests used to assess how well the thyroid gland is functioning. They measure the levels of thyroid hormones and thyroid-stimulating hormone (TSH) in the blood to determine if the thyroid is producing the right amount of hormones. These tests help diagnose and monitor conditions like hyperthyroidism (overactive thyroid) and hypothyroidism (underactive thyroid).

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Disclaimer section

Purpose

The purpose of the HealthHelp's clinical guidelines is to assist healthcare professionals in selecting the medical service that may be appropriate and supported by evidence to safely improve outcomes. Medical information is constantly evolving, and HealthHelp reserves the right to review and update these clinical guidelines periodically. HealthHelp reserves the right to include in these guidelines the clinical indications as appropriate for the organization's program objectives. Therefore the guidelines are not a list of all the clinical indications for a stated procedure, and associated Procedure Code Tables may not represent all codes available for that state procedure or that are managed by a specific client-organization.

Clinician Review

These clinical guidelines neither preempt clinical judgment of trained professionals nor advise anyone on how to practice medicine. Healthcare professionals using these clinical guidelines are responsible for all clinical decisions based on their assessment. All Clinical Reviewers are instructed to apply clinical indications based on individual patient assessment and documentation, within the scope of their clinical license.

Payment

The use of these clinical guidelines does not provide authorization, certification, explanation of benefits, or guarantee of payment; nor do the guidelines substitute for, or constitute, medical advice. Federal and State law, as well as member benefit contract language (including definitions and specific contract provisions/exclusions) take precedence over clinical guidelines and must be considered first when determining eligibility for coverage. All final determinations on coverage and payment are the responsibility of the health plan. Nothing contained within this document can be interpreted to mean otherwise.

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National and Local Coverage Determination (NCD and LCD)



NOTICE

To ensure appropriate review occurs to the most current NCD and/or LCD, always defer to <https://www.cms.gov/medicare-coverage-database/search.aspx>.

Background

National Coverage Determinations (NCD) and Local Coverage Determinations (LCD) are payment policy documents outlined by the Centers for Medicare and Medicaid Services (CMS) and the government's delegated Medicare Audit Contractors (MACs) that operate regionally in jurisdictions.

CMS introduced variation between different jurisdictions/Medicare Audit Contractors (MACs) and their associated covered code lists with the transition to ICD 10. The variation resulted in jurisdictions independently defining how codes are applied for exclusions, limitations, groupings, ranges, etc. for the medical necessity indications outlined in the NCD and LCD. Due to this variation, there is an inconsistent use/application of codes and coverage determinations across the United States between the different MACs.

In addition, **WITHOUT** notice, CMS can change the codes that indicate medical necessity and the format of the coverage determinations/associated documents (eg, Articles). This is an additional



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challenge for organizations to keep up with ongoing, unplanned changes in covered codes and medical necessity indications.

Medical Necessity Codes

Due to the variation in code application between jurisdictions/MACs and that updates can happen without notification, HealthHelp is not able to guarantee full accuracy of the codes listed for any Coverage Determination, and advises that prior to use, the associated Coverage Determination Articles are reviewed to ensure applicability to HealthHelp's programs and any associated NCDs and LCDs.

For Internal Use Only:

11248 11249 11253 11282 11325 11328 11333 11349 11350 11351 11352 11354 11355 11356
11358 11359 11360 11361 11362 11365 11366 11367 11368 11369 11370 11374 11375 11394
11395 11396 11565