



SKIN & BEAUTY CENTER
Cosmetic, Medical and Surgical Dermatology

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Removal of Benign Skin Lesions

Benign skin lesions are common and are frequently removed at the patient's request. Removal of certain benign skin lesions that do not pose a threat to health or function are considered cosmetic, and as such, are not covered by the Medicare program, under section 1862 (a) (1) of the Medicare Law, and by many private insurances.

The following lesion removal policy applies to these skin lesions: seborrheic keratoses, some moles, sebaceous (epidermoid) cysts, and viral warts (excluding venereal warts [condyloma acuminatum]).

INDICATIONS AND LIMITATIONS OF COVERAGE:

There may be instances in which the removal of benign seborrheic keratoses, sebaceous cysts and viral warts is medically appropriate. Your insurance will therefore consider their removal as medically necessary, and not cosmetic, if one or more of the following conditions is presented and clearly documented in the medical record:

- The lesion has one or more of the following characteristics: bleeding, intense itching, or pain.
- The lesion has physical evidence of inflammation, e.g., purulence, oozing, edema, and redness
- The lesion obstructs an orifice or clinically restricts vision.
- There is clinical uncertainty as to the likely diagnosis, particularly where malignancy is a realistic consideration based on lesion appearance.
- A prior biopsy suggests or is indicative of lesion malignancy.
- The lesion is in an anatomical region subject to recurrent physical trauma and there is documentation that such trauma has, in fact, occurred.

REASONS FOR NON-COVERAGE:

Benign-skin lesion removals for reasons other than those given under "Indications and Limitations of Coverage" above are considered cosmetic and will not be covered. These reasons include, but are not limited to, emotional distress, "makeup trapping", and non-problematic lesions in any anatomical location. Lesions in sensitive anatomical locations, but which are not clinically problematic, do not qualify for coverage of removal on the basis of location alone.

If you wish one or more of these benign asymptomatic lesions removed for cosmetic purposes, you become liable for the service rendered. The physician has the responsibility to notify you in advance that your insurance or Medicare will not cover cosmetic dermatologic surgery and that you will be liable for the cost of the service.

A claim need not necessarily be submitted to Medicare or your private insurance for this service unless you



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believe your supplementary insurance coverage will pay for the service after a formal denial is issued. If a claim is filed, we must use ICD-9 code V50.1 - "Other plastic surgery for unacceptable cosmetic appearance" - in conjunction with HCPCS code A9270 - "Non-covered item or service," to ensure denial.