



TITLE:	BENIGN SKIN LESION REMOVAL POLICY
POLICY #:	MM-PNP-054
VERSION #:	01
DEPARTMENT:	MEDICAL MANAGEMENT
ORIGINAL EFFECTIVE DATE:	04/01/2024
CURRENT REVISION DATE:	N/A

1. PURPOSE

This policy will be used to inform medical necessity decisions related to authorization requests for Ablative Procedures for benign skin lesion removal.

2. SCOPE

Medical UM Department

3. DEFINITIONS - N/A

4. RESPONSIBILITIES

Medical UM Department

5. POLICY

Medical Necessity

Curative considers the following as medically necessary:

Removal of acquired or small (less than 1.5 cm) congenital nevi (moles), cutaneous and subcutaneous neurofibromas, dermatofibromas, dermatosis papulosa nigra, acrochordon (skin tags), pilomatrixomata (slow-growing hard mass underneath the skin that arises from hair follicle matrix cells), sebaceous cysts (pilar and epidermoid cysts), seborrheic keratoses (also known as basal cell papilloma, senile warts or brown warts), or other benign skin lesions, or needle hyfrecation for sebaceous hyperplasia, medically necessary if *any* of the following criteria is met:

1. Biopsy suggests or is indicative of pre-malignancy (e.g., dysplasia) or malignancy; *or*
2. Due to its anatomic location, the lesion has been subject to recurrent trauma/irritation (eg, bra line, waist band, etc.); *or*
3. Lesion appears to be pre-malignant (e.g., actinic keratoses (see **Actinic Keratoses Treatment**), Bowen's disease, dysplastic lesions, dysplastic nevus syndrome, large congenital melanocytic nevi, lentigo maligna, or leukoplakia) or malignant (due to coloration, change in appearance or size, etc. (see note below) especially in a person with personal or family history of melanoma); *or*
4. Skin lesions are causing symptoms (e.g., bleeding, burning, intense itching, or irritation); *or*
5. The lesion has evidence of inflammation (e.g., edema, erythema, or purulence); *or*
6. The lesion is infectious (e.g., warts (verruca vulgaris)); *or*
7. The lesion restricts vision or obstructs a body orifice.

***Note:** Clinical suspicion of malignancy, is indicated by *any* of the following:

- Asymmetry - one half of the mole or lesion does not match the other half.
- Border - the edges of a mole or lesion are irregular, ragged, blurred.
- Color - the color is not the same all over and may include shades of brown or black or sometimes have patches of pink, red, white, or blue.
- Diameter - the mole or lesion is larger than six millimeters across (about ¼ inch or the size of a pencil eraser); or
- Evolving - the mole is changing in size (enlarging), shape or color.

Cosmetic

In the absence of any of the above indications in section I, Curative considers the following cosmetic:

Removal of dermatofibromas, dermatosis papulosa nigra, pilomatrixoma, poikiloderma of Civatte (sun aging), sebaceous cysts, seborrheic keratoses, small nevi (moles), or other benign skin lesions, or needle hyfreaction for sebaceous hyperplasia.

6. PROCEDURE

N/A

7. TRAINING REQUIREMENT

- 7.1.** All Medical UM associates are responsible for reading and comprehending this procedure. Employees are also responsible for contacting management or Privacy and Compliance with any questions or concerns regarding the information contained within this procedure.

8. ENFORCEMENT

Violations of this controlled document will cause the imposition of sanctions in accordance with the Curative sanctions-controlled document. This may include verbal/written warning, suspension, up to termination of employment or volunteer, intern, contractor status with Curative. Additional civil, criminal, and equitable remedies may apply.

9. DOCUMENTATION

n/a

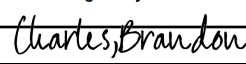
10. REFERENCE DOCUMENTS AND MATERIALS

- 10.1.** Regulatory Authority - N/A

11. COLLABORATING DEPARTMENTS

N/A

12. DOCUMENT CONTROL

APPROVED BY:		
Charles, Brandon	4/19/2024	<small>DocuSigned by:</small>  <small>DE2813BF834C49A...</small>
(Printed Name)	(Date)	(Signature)

REVISION HISTORY			
Date	Author	Version	Comments
			Initial Version

APPENDICES

Any applicable attachments, resources or other materials should be included as appendices in this section. Label each appendix as follows:

Appendix A:

N/A