Policy Name: Digital Breast Tomosynthesis
Effective Date: 10/19/2016

Important Information – Please Read Before Using This Policy

These services may or may not be covered by all Medica plans. Please refer to the member’s plan document for specific coverage information. If there is a difference between this general information and the member’s plan document, the member’s plan document will be used to determine coverage. With respect to Medicare, Medicaid and MinnesotaCare members, this policy will apply unless these programs require different coverage. Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Medica coverage policy may call the Medica Provider Service Center toll-free at 1-800-458-5512.

Medica coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care and treatment.

Coverage Policy
Digital breast tomosynthesis is COVERED for the screening or diagnosis of breast cancer.

Note: See also related Medica coverage policies; Breast Magnetic Resonance Imaging (MRI) and Breast-Specific Gamma Imaging (BSGI), Scintimammography and Molecular Breast Imaging.

Description
Digital breast tomosynthesis (DBT) is a three-dimensional breast imaging technique based on full-field digital mammography (FFDM). As opposed to conventional mammography, a tomosynthesis unit’s x-ray tube sweeps along an arc around the breast to acquire between 60 and 70 two-dimensional projections from slightly different angles. The resulting images are digitally manipulated to create tomograms in any plane, allowing for 3-D reconstruction that reveals depth. The slices can be displayed individually or in a dynamic (movie) mode. 3-D reconstruction purports to improve resolution and visibility of dense breast tissue.

FDA Approval
Hologic, Inc., Bedford, MA, received PMA approval February 11, 2011, for the Selenia Dimensions 3D system to be used for screening and diagnosis of breast cancer. In August 2014, GE Healthcare received PMA approval for its SenoClaire system, and in April 2015, the FDA granted PMA for Siemens Healthcare’s Mammatom Inspiration® with Tomosynthesis Option as an add-on component to the Mammatom Inspiration digital mammography platform.

Prior Authorization
Prior authorization is not required.
Coding Considerations
Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only, and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

CPT Codes:
- 77061 - Digital breast tomosynthesis; unilateral
- 77062 - Digital breast tomosynthesis; bilateral
- 77063 - Screening digital breast tomosynthesis, bilateral (List separately in addition to code for primary procedure)

HCPC Code:
- G0279 - Diagnostic digital breast tomosynthesis, unilateral or bilateral (List separately in addition to G0204 or G0206)

Original Effective Date: 10/1/2012

Re-Review Date(s):
- 7/15/2015
- 6/15/2016
- 10/19/2016