

# Ask Dr. Miller



August 2021

**The following questions were posed by NBCCEDP grantees:**

***Question #1: When a first biopsy reveals atypical ductal hyperplasia (ADH) and an excisional biopsy is required, would the results from the first or second biopsy be considered the final diagnosis? Also, since ADH is not cancer and cannot be referred to Medicaid, can we cover the excisional biopsy?***

Answer: Atypical ductal hyperplasia on core or needle biopsy requires a confirmatory excisional biopsy due to the high chance of there being an associated invasive cancer in the lesion. Therefore, the excisional biopsy is the diagnostic procedure that provides the final diagnosis. Because the excisional biopsy is a diagnostic procedure, it can be covered with NBCCEDP funds.

***Question #2: Does CDC require a client receive a clinical breast exam prior to getting an NBCCEDP-funded mammogram?***

Answer: CDC does not require a CBE to be performed prior to having a mammogram. There are no national guidelines that require a CBE prior to receiving a mammogram.

***Question #3: We have a client who had a prior bilateral mastectomy for breast cancer. There is concern that the cancer has metastasized into her chest wall and CT scan of the chest has been ordered. Can we cover this scan since it is being done to assess for breast metastasis?***

Answer: Yes. This client is under surveillance following her breast cancer diagnosis. As long as a woman meets your program eligibility criteria, diagnostic workup for recurrence or metastasis is covered as a part of surveillance.

***Question #4: We have a 26 year old client that was referred to the program due to nipple discharge. She has no history of previous breast biopsies or family history of breast or ovarian cancer. An ultrasound was completed with a result of BIRADS 3. The provider is recommending an MRI for further evaluation which is consistent with NCCN guidelines. However, given this client is not high risk, we weren't sure if NBCCEDP funds could be used to pay for this test?***

Answer: This woman fits the “under 40 symptomatic” category. Young woman can be served by the program if they are either high risk or symptomatic. Therefore, she qualifies for diagnostic work up through the NBCCEDP using federal funds as long as she meets your program’s eligibility criteria. Please refer to the breast clinical services section of the program manual.

***Question #5: Does CDC allow for reimbursement of 3D mammograms? I don't see 3D mammograms listed on the CPT code list.***

Answer: Yes. CDC has allowed for reimbursement of 3D mammograms since October 2016. 3D mammography is the same as tomosynthesis. The codes on the CPT list are 77063 for screening tomosynthesis and G0279 for diagnostic tomosynthesis.