

Position Statement
on
Reflectance Confocal Microscopy (RCM)
Approved by the Board of Directors: April 28, 2018;
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Reflectance Confocal Microscopy (RCM) is a diagnostic tool that provides noninvasive high-resolution stitched mosaic images at multiple levels of the epidermis and superficial dermis. RCM can scan 8 by 8 mm areas of skin at multiple depth levels within the epidermis and superficial dermis, yielding multiple stacked images at various planes. This imaging allows for a diagnostic histologic interpretation of the images that can be done on-site or, through electronic data transmission, at a distant site by physicians proficient in RCM image interpretation.

RCM allows for early detection and diagnosis of skin cancers, benign skin lesions, and other skin disorders, when used in a clinically appropriate manner. RCM can noninvasively provide distinctions between benign, malignant or pre-malignant lesions, it can obviate the need for any further investigations or actions, or it may facilitate planning further diagnostic or treatment interventions.¹⁻¹⁰ The set of images produced by RCM can be read shortly after their production, thus facilitating prompt therapeutic decisions.

1. The Academy supports the use of RCM as a modality for in vivo microscopic examination of suspicious epidermal and superficial dermal skin lesions for diagnosing skin pathology when clinically appropriate.
2. Dermatologists and their staff need to be aware of, and comply with, the full scope of federal and state laws and regulations governing the provision of and billing for RCM services. Many payers have regulations that establish coverage guidelines and reimbursement criteria for RCM. Such coverages and billing guidelines vary from payer to payer.
3. Practices using RCM as a diagnostic tool should expend appropriate efforts to understand and use proper CPT® coding for the services provided. Precise coding may be verified through a careful reading and interpretation of the CPT coding definitions for RCM as well as via any pertinent communications from Medicare Administrative Contractors (MACs) and private insurers.

The Academy recommends additional U.S.-based research to clarify the utility and efficacy of this technology in the diagnosis of skin lesions.

References

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