

Eligibility criteria for skin lesion removal and minor skin surgery

The eligibility criteria listed below are applicable to skin lesion removal when performed under local anaesthetic or general anaesthetic (as required):

1. skin lesion excision
2. skin lesion cryotherapy
3. skin lesion curettage and diathermy.

1. Skin lesion excision

Southern Cross will only reimburse the cost of the skin lesion excision under a member's policy when at least **one** of the following criteria for each skin lesion type below are met for that member.

a) Common skin lesions

- For cancers: basal cell carcinoma (BCC), squamous cell carcinoma (SCC), solar/actinic keratosis (AK), keratoacanthoma.
- For cysts, and other lesions relating to the sweat glands or hair follicles.
- For lesions suspicious for cancer eg rapidly growing mole.
- For other benign skin lesions where medically necessary and not of a cosmetic nature.

b) Melanoma

Treatment for melanoma skin lesions must be in accordance with the Clinical Practice Guidelines for the Management of Melanoma in Australia and New Zealand.

2. Skin lesion cryotherapy

Southern Cross will only reimburse the cost of skin lesion cryotherapy under a member's policy as an alternative to skin lesion excision for that member for the treatment of:

- superficial basal cell carcinoma that are not near a vital structure
- solar/actinic keratoses
- Bowen's disease / squamous cell carcinoma in situ
- other benign skin lesions where medically necessary and not of a cosmetic nature.

3. Skin lesion curettage and diathermy

Southern Cross will only reimburse the cost of skin lesion curettage and diathermy under a member's policy as an alternative to skin lesion excision for that member for the treatment of:

- superficial and nodular well defined primary basal cell carcinoma that are not near a vital structure
- multiple squamous cell carcinomas
- hypertrophic solar/actinic keratoses
- other benign skin lesions where medically necessary and not of a cosmetic nature.

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Please also ensure you are familiar with all **policy exclusions**, including:

- Acute care
- Congenital conditions
- Cosmetic treatment/procedures
- Health screening
- Treatment of any condition not detrimental to health
- Unapproved healthcare services.

Refer to the relevant policy document for specific conditions and exceptions that apply to these exclusions.