

Gynecomastia

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1.0 CPT¹ PROCEDURE CODES

19300, 19304, 19318

2.0 DESCRIPTION

2.1 Pathological gynecomastia (International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) 611.1 for services provided prior to International Classification of Diseases, 10th Revision (ICD-10) implementation or International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM) N62 for services provided on or after the date specified by the Centers for Medicare and Medicaid Services (CMS) in the Final Rule as published in the **Federal Register**) is an abnormal enlargement of the male mammary glands. Some causes of pathological gynecomastia are testicular or pituitary tumors, some syndromes of male hypogonadism, cirrhosis of the liver, administration of estrogens for prostatic carcinoma, and therapy with steroidal compounds.

2.2 Physiological (pubertal) gynecomastia occurs in teenage boys, usually between the ages of 13-15. In more than 90% of these boys, the condition resolves within a year. Gynecomastia persisting beyond one year is severe and is usually associated with pain in the breast from distension (ICD-9-CM 611.71 for services provided prior to ICD-10 implementation or ICD-10-CM N64.4 for services provided on or after the date specified by the CMS in the Final Rule as published in the **Federal Register**) and fibrous tissue stroma.

3.0 POLICY

Benefits may be cost-shared for medically necessary medical, diagnostic, and surgical treatment.

Note: Coverage criteria for surgical interventions may include, but is not limited to: severe gynecomastia (enlargement has not resolved after one year); fibrous tissue stroma exists; or breast pain.

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4.0 EXCLUSION

Surgical treatment performed purely for psychological reasons.

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