

## MOHS MICROGRAPHIC SURGERY

- 1. REASON FOR ISSUE:** This is a new directive defining Veterans Health Administration (VHA) policy for Mohs Micrographic Surgery (MMS). This policy establishes the standard for the delivery of MMS in the Department of Veterans Affairs (VA) in the management of cutaneous malignancies (known as skin cancer). This policy clarifies the requirements for MMS.
- 2. SUMMARY OF CONTENT:** This directive identifies the requirements associated with the administration of MMS. **NOTE:** *The Mohs Micrographic Surgery (MMS) SharePoint contains guidelines for the provision of MMS in the VA health care system in the management of skin cancer.*
- 3. RELATED ISSUES:** VHA Directive 1106, Pathology and Laboratory Medicine Service, dated July 27, 2018 and VHA Handbook 1106.01, Pathology and Laboratory Medicine Service (PL&MS) Procedures, dated January 29, 2016.
- 4. RESPONSIBLE OFFICE:** The Office of Specialty Care Services (10P11) is responsible for the content of this VHA directive. Questions about this policy may be referred to the Dermatology Field Advisory Committee Chair to VHA, Department of Veterans Affairs, 720-857-5562, and the National Director, Pathology and Laboratory Medicine, Department of Veterans Affairs, 319-338-0581.
- 5. RESCISSIONS:** None.
- 6. RECERTIFICATION:** This VHA directive is scheduled for recertification on or before the last working day of April 2025. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

**BY THE DIRECTION OF THE UNDER  
SECRETARY FOR HEALTH**

/s/ Lucille Beck, PhD.  
Deputy Under Secretary for Health  
for Policy and Services

**NOTE:** *All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.*

**DISTRIBUTION:** Emailed to the VHA Publications Distribution List on April 30, 2020.

**CONTENTS**

**MOHS MICROGRAPHIC SURGERY**

1. PURPOSE ..... 1

2. BACKGROUND ..... 1

3. DEFINITIONS ..... 1

4. POLICY ..... 2

5. RESPONSIBILITIES ..... 2

6. TRAINING ..... 6

7. RECORDS MANAGEMENT ..... 6

8. REFERENCES ..... 6

## MOHS MICROGRAPHIC SURGERY

### 1. PURPOSE

This Veterans Health Administration (VHA) directive provides the standard for the provision of Mohs micrographic surgery (MMS) in VA medical facilities. This directive establishes the minimum necessary requirements for the delivery of MMS.

**AUTHORITY:** Title 38 United States Code (U.S.C.) 7301(b).

### 2. BACKGROUND

a. Skin cancer is one of the most prevalent health conditions affecting Veterans in VHA. VHA is one of the largest healthcare systems in the United States, providing care to more than 9 million veterans. In 2012, 4 percent of all VHA Veterans had a diagnosis of keratinocyte carcinoma or actinic keratosis; 49,229 Veterans were diagnosed with basal cell carcinoma, and 26,310 veterans were diagnosed with squamous cell carcinoma. As the Veteran population ages, the incidence of skin cancers is expected to increase. VHA recognizes this as an emerging priority and is committed to providing accessible and appropriate skin cancer treatment for Veterans.

b. VHA is committed to providing Veterans with access to skin cancer surgery that is prompt, safe, and appropriate. Prompt access to appropriate care is crucial to limiting morbidity and mortality from skin cancer. MMS is an essential component of comprehensive skin cancer care and requires complex coordination of skin cancer providers.

c. This directive standardizes the requirements to support MMS provided to Veterans with skin cancer, and in accordance with implementation of the Mission Act.

### 3. DEFINITIONS

a. **Mohs Micrographic Surgery.** Mohs Micrographic Surgery (MMS) is a specific surgical technique for tumor extirpation, with narrow beveled margins and complete circumferential and deep margin assessment by frozen section. To be considered MMS, the Mohs micrographic surgeon must act as the pathologist by performing the microscopic evaluation of the specimens removed for diagnostic purposes). MMS is typically used for the removal of complex, aggressive, or ill-defined skin cancer. This procedure is also used in excising skin cancer in cosmetically sensitive areas.

b. **Mohs Micrographic Surgery Operating Suite.** The MMS operating suite is the location where MMS is performed. Mohs is typically performed in outpatient clinic treatment rooms. **NOTE:** See the MMS SharePoint for a list of resources needed in the MMS operating suite.

c. **Mohs Micrographic Surgery Laboratory.** The MMS laboratory is the site for processing tissue for intraoperative pathology. The MMS laboratory is a satellite of the main pathology laboratory and falls under anatomic pathology Clinical Laboratory Improvement Amendments (CLIA) certification. The MMS laboratory should be

contiguous with or in close proximity to the MMS operating suite. **NOTE:** See the MMS SharePoint for a list of resources needed in the MMS laboratory.

#### 4. POLICY

It is VHA policy that MMS is provided to Veterans with skin cancer in accordance with the standard of care and MMS SharePoint implementation procedures. **NOTE:** See MMS SharePoint for MMS implementation procedures: [https://dva.gov.sharepoint.com/:f:/s/VACOVHAPS/10ppolrev/EjWufiO6mEJNk1jnEFXAcKYBUjubnTRyK\\_Ylcr\\_IHYIMTg?e=iM8GDn](https://dva.gov.sharepoint.com/:f:/s/VACOVHAPS/10ppolrev/EjWufiO6mEJNk1jnEFXAcKYBUjubnTRyK_Ylcr_IHYIMTg?e=iM8GDn). **NOTE:** This is an internal website that is not available to the public.

#### 5. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for ensuring VHA compliance with this directive.

b. **Deputy Under Secretary for Health for Policy and Services.** The Deputy Under Secretary for Health for Policy and Services is responsible for:

(1) Communicating the contents of this directive to each of the Veterans Integrated Services Networks (VISN).

(2) Ensuring that each VISN Director has the sufficient resources to fulfill the terms of this directive in all the VA medical facilities within that VISN.

(3) Providing oversight of VISNs to ensure compliance with this directive, relevant standards, and applicable regulations.

c. **Chief Officer, Office of Specialty Care Services.** The Chief Officer, Office of Specialty Care Services, is responsible for:

(1) Ensuring that all VA medical facilities with a dermatology service or section within each VISN have a plan for the treatment of skin cancer and access to MMS for Veterans diagnosed with skin cancer. The plan for the treatment of skin cancer should be consistent with the standard of care and 2012 Mohs Appropriate Use Criteria, which can be found at <https://www.ncbi.nlm.nih.gov/pubmed/22959232>. **NOTE:** The written plan is to be developed by local clinical leadership with the assistance and guidance from the Office of Specialty Care Services when needed.

(2) Reviewing and approving each new clinical activation plan for VA sites offering MMS in conjunction with the National Dermatology Field Advisor to VA Central Office. **NOTE:** New clinical activation plans are required before VA sites begin and are approved by VA to offer MMS. The deactivation of an MMS site would be triggered by the loss of a Mohs surgeon or Mohs histotechnician without a suitable replacement. There is no deactivation plan required.

d. **National Director, Pathology and Laboratory Medicine Service.** The National Director, Pathology and Laboratory Medicine Service (P&LMS) is responsible for ensuring compliance with this directive and communicating this information to the local P&LMS (i.e., Chief of P&LMS).

e. **Dermatology Field Advisory Committee Chair.** The Dermatology Field Advisory Committee Chair for VHA is responsible for:

(1) Reviewing the management of skin disease to include skin cancer in the VHA including either reviewing or delegating the review of activation plans for new Mohs surgery sites. This duty can be delegated to another VA Mohs surgeon not located at that VA medical facility.

(2) Reviewing and granting non-fellowship-trained surgeons who are vital to patient access to care, approval to continue performing Mohs micrographic surgery (see paragraph h. (3)(a) and h.(3)(b)).

f. **Veterans Integrated Service Network (VISN) Director.** Each VISN Director or designee is responsible for:

(1) Ensuring that all facilities within the VISN comply with this directive.

(2) Identifying appropriate measures to assess skin cancer quality and to quantify improvements in care, and to monitor compliance with reporting of skin cancer measures.

(3) Ensuring access to appropriate skin cancer care within the VISN.

(4) Providing the list of non-fellowship-trained surgeons who are vital to patient access to care, to the Dermatology Field Advisory Committee Chair (see paragraph h. (3)(a) and h.(3)(b)).

g. **VA Medical Facility Director.** The VA medical facility Director (or designee) is responsible for:

(1) Providing oversight to ensure that VA medical center staff comply with this directive.

(2) Ensuring sufficient resources for appropriate skin cancer care and approving credentialing of the local Mohs surgeon in accordance with VHA Handbook 1100.19, Credentialing and Privileging, dated October 15, 2012, and VHA Directive 1106, Pathology and Laboratory Medicine Service (P&LMS), dated January 29, 2018.

(3) Sending the list of non-fellowship-trained surgeons who are vital to patient access to care, to the VISN Director (see paragraph h. (3)(a) and h.(3)(b)).

h. **VA Medical Facility Chief of Staff.** The VA medical facility Chief of Staff is responsible for:

(1) Ensuring that a 10 percent random retrospective second review is performed for all Mohs surgeries. **NOTE:** 100 percent review is performed for any Veteran requiring Mohs surgery in the VHA for which a previous tissue diagnosis has not been performed by the local VA Pathology & Laboratory Medicine Service, in accordance with VHA Handbook 1106.01, Pathology and Laboratory Medicine Service (P&LMS) Procedures, dated January 29, 2016.

(2) Reviewing and approving the local MMS new site activation plan submitted by the VA medical facility Chief of Dermatology Service.

(3) Credentialing the local Mohs micrographic surgeon in accordance with the requirements of VHA Handbook 1100.19 and VHA Directive 1106; which also includes:

(a) Identifying non-fellowship-trained surgeons who must be retrained to code the correct procedure.

(b) Preparing a list of Non-fellowship-trained surgeons who are vital to patient access to care, to the VA medical facility Director. **NOTE:** In order to be able to provide MMS, the Mohs micrographic surgeon must have completed a minimum one-year fellowship through an Accreditation Council for Graduate Medical Education or American College of Mohs Surgery approved fellowship. Effective April 30, 2021, VA medical facilities Chief of Staff must identify any non-fellowship-trained surgeons coding for Mohs surgery. Non-fellowship-trained surgeons identified may continue to perform excision with complete circumferential peripheral and deep margin assessment by frozen section but must be retrained to code the correct procedure by the VA medical facility Chief of Staff. In the event there are non-fellowship-trained surgeons who are vital to patient access to care, the Dermatology Field Advisory Committee must individually grant these surgeons approval to continue performing Mohs micrographic surgery. The VA medical facility Director must then send the list of those non-trained surgeons needing individual approval to the VISN Director. The VISN Director must provide the list to the Dermatology Field Advisory Committee Chair.

i. **VA Medical Facility Chief of Dermatology Service (or Section).** The VA medical facility Chief of Service (or Section) is responsible for:

(1) Overseeing that the appropriate resources required to provide MMS are fulfilled, as outlined on the MMS SharePoint.

(2) Submitting the necessary information for the MMS activation plan detailed on the MMS SharePoint:

[https://dvagov.sharepoint.com/:f/s/VACOVHAPS/10ppolrev/EjWufiO6mEJNk1jnEFXAcKYBUjubnTRYK\\_Ylcr\\_IHYIMTg?e=iM8GDn](https://dvagov.sharepoint.com/:f/s/VACOVHAPS/10ppolrev/EjWufiO6mEJNk1jnEFXAcKYBUjubnTRYK_Ylcr_IHYIMTg?e=iM8GDn). **NOTE:** This is an internal website that is not available to the public.

(3) Developing and updating an appropriate skin cancer management or treatment plan for Veterans. **NOTE:** Any substantive change made to an access plan must be reported to the VISN Director.

j. **VA Medical Facility Chief of Pathology.** The VA medical facility Chief of Pathology is responsible for:

(1) Maintaining the MMS laboratory as a satellite of the main pathology laboratory, including oversight of compliance to maintain the MMS laboratory under the main laboratory accreditation, oversight of the MMS laboratory manual, and storage of slides, in accordance with VHA Handbook 1106.01 and as described on the MMS SharePoint.

(2) Collaborating with the Mohs micrographic surgeon to provide quality assurance on Mohs histopathology, with a proficiency dual review of a random 10 percent of cases in accordance with VHA Handbook 1106.01 and the MMS SharePoint.

(3) Assisting the VA medical facility Chief of Staff and VA medical facility Chief of Dermatology Service as needed for evaluation of the credentialing and competencies of the Mohs micrographic surgeon.

k. **VA Medical Facility Mohs Micrographic Surgeon.** The VA medical facility Mohs micrographic surgeon is responsible for:

(1) Performing MMS in accordance with evidence-based practice. The Mohs micrographic surgeon acts in two integrated but separate and distinct capacities: surgeon and pathologist. The Mohs micrographic surgeon is responsible for:

(a) Completing excision of tissue, mapping and orientation of the specimen, direct supervision of frozen section preparation by the Mohs histopathology technologist in the Mohs laboratory.

(b) Completing microscopic examination of the excised tissue by systematic use of horizontal frozen sections.

(c) Interpreting and reporting of Mohs histopathology results.

(2) Confirming appropriate use of MMS by review of patient history, physical, and tumor pathology. Any biopsy pathology performed outside of VA should be requested and read by the VHA anatomic pathology service in concordance with VHA Handbook 1106.01.

(3) Completing operative documentation as described on the MMS SharePoint.

(4) Supervising the MMS histopathology technologist with the assistance of the VA medical facility Chief of Pathology.

(5) Maintaining the MMS laboratory with assistance from the Chief of Pathology, and oversight of all quality assurance documentation as described on the MMS SharePoint.

l. **VA Medical Facility Mohs Histopathology Technologist.** The VA medical facility Mohs histopathology technologist is responsible for:

(1) Processing the tissue specimen, including freezing, sectioning, mounting and staining the slides according to the local MMS laboratory manual.

(2) Ensuring precise orientation and a complete peripheral and deep margin for inspection. **NOTE:** *This responsibility is completed in close proximity and under direct supervision of the Mohs Micrographic surgeon.*

(3) Maintaining the Mohs laboratory, with assistance from the Mohs micrographic surgeon and the Chief of Pathology including slide management, quality assurance, and maintenance of equipment and slides. **NOTE:** *See the MMS SharePoint for procedures relating to this responsibility.*

## 6. TRAINING

There are no formal training requirements associated with this directive.

## 7. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive shall be managed per the National Archives and Records Administration (NARA) approved records schedules found in VA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Manager or Records Liaison.

## 8. REFERENCES

a. 38 U.S.C. 7301(b).

b. VHA Directive 1106, Pathology and Laboratory Medicine Service, dated July 27, 2018.

c. VHA Handbook 1100.19, Credentialing and Privileging, dated October 15, 2012.

d. VHA Handbook 1106.01 Pathology and Laboratory Medicine Service (PL&MS) Procedures dated January 29, 2016.

e. Accreditation Council for Graduate Medical Education. *ACGME Program Requirements for Graduate Medical Education in Micrographic Surgery and Dermatologic Oncology.*

[https://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/081\\_MSDO\\_2019\\_TCC.pdf?ver=2019-03-21-161605-130](https://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/081_MSDO_2019_TCC.pdf?ver=2019-03-21-161605-130). **NOTE:** *This is a linked document outside the control of VA and may not conform to Section 508 of the Rehabilitation Act of 1973.*

f. Ad Hoc Task Force, Connolly, S.M., Baker, D.R., Coldiron, B.M., Fazio, M.J., Storrs P.A., Vidimos, A.T., Zalla, M.J., Brewer, J.D., Begolka, W.S. Ratings Panel, Berger T.G., Bigby, M., Bolognia, J.L., Brodland, D.G., Collins S., Cronin Jr., T.A., Dahl, M.V., Grant-Kels, J.M., Hanke, C.W., Hruza, G.J., James, W.D., Lober, C.W., McBurney, E.I., Norton, S.A., Roenigk, R.K., Wheeland R.G., and Wisco W.J.



*AAD/ACMS/ASDSA/ASMS 2012 appropriate use criteria for Mohs micrographic surgery: a report of the American Academy of Dermatology, American College of Mohs Surgery, American Society for Dermatologic Surgery Association, and the American Society for Mohs Surgery.* Am Acad Dermatol. 2012 Oct;67(4):531-50. doi: 10.1016/j.jaad.2012.06.009. Epub 2012 Sep 5:  
<https://www.ncbi.nlm.nih.gov/pubmed/22959232>.

g. Fish, FS. Manual of Frozen Section Processing for Mohs Micrographic Surgery. Milwaukee: American College of Mohs Surgery, 2017.

h. Mohs Micrographic Surgery (MMS) SharePoint:  
[https://dvagov.sharepoint.com/:f/s/VACOVHAPS/10ppolrev/EjWufiO6mEJNk1jnEFXAcKYBUjubnTRyK\\_Ylcr\\_IHYIMTg?e=iM8GDn](https://dvagov.sharepoint.com/:f/s/VACOVHAPS/10ppolrev/EjWufiO6mEJNk1jnEFXAcKYBUjubnTRyK_Ylcr_IHYIMTg?e=iM8GDn). **NOTE:** *This is an internal VA website that is not available to the public.*