MEDICAL POLICY STATEMENT		
Effective Date	Next Annual Review Date	Last Review / Revision Date
8/23/2004	7/2012	7/2011
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CareSource

CSMG Medical Policy Statements are derived from literature based and supported clinical guidelines, nationally recognized utilization and technology assessment guidelines, other medical management industry standards, and published MCO clinical policy guidelines. Medically necessary services are those health care services or supplies which are proper and necessary for the diagnosis or treatment of disease, illness, or injury and without which the patient can be expected to suffer prolonged, increased or new morbidity, impairment of function, dysfunction of a body organ or part or significant pain and discomfort. These services meet the standards of good medical practice in the local area, are the lowest cost alternative and are not provided mainly for the convenience of the member or provider.

A. SUBJECT

Breast Reconstruction Surgery

B. BACKGROUND

This document is to establish a policy to review the medical necessity for reconstructive breast surgery.

C. POLICY

For Special Needs Plan members, reference the below link to search for Applicable National Coverage Descriptions (NCD) and Local Coverage Descriptions (LCD):

1. Caresource considers reconstructive breast surgery medically necessary after mastectomy or lumpectomy that resulted in significant deformity. Any associated nipple and areolar reconstruction needed as part of the above procedures may also be considered medically necessary. Reduction and, if needed, augmentation mammoplasty and related reconstructive procedures on the unaffected side for symmetry may also be considered medically necessary.

2. CareSource considers all other conditions for breast reconstructive surgery as cosmetic and not medically necessary.

For Medicare NCD: CMS Publication 100-3, Medicare National Coverage Determinations, Chapter 1, Section 140.2

https://www.cms.gov/manuals/downloads/ncd103c1_Part2.pdf

D. REVIEW / REVISION HISTORY

Date Issued: 8/23/2004
Date Revised: 7/1/2009
Date Reviewed: 7/1/2009, 7/2011

E. REFERENCES

1. Brandberg Y, Malm M, Rutqvist LE, et al. A prospective randomised study (named SVEA) of three methods of delayed breast reconstruction. Study, design, patients' preoperative problems and expectations. Scand J Plast Reconstr Surg Hand Surg. 1999; 33(2):209-216.
2. Mathes SJ. Breast implantation: The quest for safety and quality, NEJM 1997; 336(10):718-719.
3. CMS Publication 100-3, Medicare National Coverage Determinations, Chapter 1, Section 140.2

The Medical Policy Statement detailed above has received due consideration as defined in the Medical Policy Statement Policy and is approved.