Effective Date: 6-25-14

Nevada Health Solutions LLC

NHS MEDICAL POLICY

Reduction Mammoplasty
Procedure 2014-006

May be indicated when ALL the following are present:

1	Persistent symptoms in at least 2 of the anatomical body areas below, affecting daily activities for at least 1 year: • Headaches • Pain in neck • Pain in shoulders • Pain in upper back • Painful kyphosis documented by X-rays • Severe bra strap grooving or ulceration of shoulder • Arm numbness consistent with brachial plexus compression syndrome
2	Member has undergone an evaluation by a physician who has documented that there is a reasonable likelihood that the member's symptoms are primarily due to macromastia and that reduction mammoplasty is likely to result in improvement of the chronic pain.
3	Pain symptoms persist as documented by the physician despite at least a 3-month trial of at least 1 of the following therapeutic measures based on the presenting symptoms: • Analgesic/non-steroidal anti-inflammatory drugs (NSAIDs) interventions • Physical therapy/exercises/posturing maneuvers • Supportive devices (e.g., proper bra support, wide bra straps) • Medically supervised weight loss program for overweight or obese patient • Wound care for skin ulceration
4	Women 40 years of age or older are required to have a mammogram that was negative for cancer performed within the year prior to the date of the planned reduction mammoplasty.
5	Member is at least 18 years old, **and** breasts have stopped growing and are stable in size for at least 12 months before surgery.

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6	The surgeon estimates that **at least** the following amounts (in grams) of tissue will be removed from each breast, based on the member's body surface area. **See Table 1.** **Simplified formula for calculation of body surface area:** **(BSA (in m^2) = [height (cm)] $^{0.718}$ X [weight (kg)] $^{0.427}$ X .007449).**

Table 1: Weight of breast tissue removed, per breast, as a function of body surface area

Body Surface Area (m^2)	Average grams of tissue per breast to be removed
1.35	199
1.40	218
1.45	238
1.50	260
1.55	284
1.60	310
1.65	338
1.70	370
1.75	404
1.80	441
1.85	482
1.90	527
1.95	575
2.00	628
2.05	687
2.10	750
2.15	819
2.20	895
2.25	978
2.30	1068
2.35	1167
2.40	1275
2.45	1393
2.50	1522
2.55	1662
2.60	1806
2.65	1972
2.70	2154
2.75	2352
2.80	2568

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2.85	2804
2.90	3061
2.95	3343
3.00	3650
3.05	3985
3.10	4351
3.15	4750
3.20	5186
3.25	5663
3.30	6182
3.35	6750
3.40	7369
3.45	8045
3.50	8783
3.55	9589
3.60	10468
3.65	11428
3.70	12476
3.75	13619
3.80	14867
3.85	16230
3.90	17717
3.95	19340
4.00	21112
4.05	23045
4.10	25156
4.15	27459
4.20	29972
4.25	32716
4.30	35710
4.35	38977
4.40	42543
4.45	46435
4.50	50682
4.55	55316
4.60	60374
4.65	65893
4.70	71915
4.75	78487
4.80	85658

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CODE REFERENCE (This may not be a comprehensive list of codes to apply to this policy.)

CPT 19318

POLICY HISTORY/REVISION INFORMATION

Date	Action/Description
08/13/2014	UPDATE: The most widely used table of tissue removal amounts in the insurance industry is the Schnur table. It has been validated in the literature. This table is substituted. The previous table recommended removal of much higher tissue amounts and is not generally used. The risks associated with removing too much tissue at once include compromising vascular supply to the nipple area. The Schnur table is a safer approach. This will be brought back to the next committee for approval.
06/19/2015	Annual review and approval by UM Committee
02/26/2016	Additions made to #1 and #2
12/14/2016	Annual review and approval by UM Committee
12/13/2017	Annual review and approval by UM Committee
12/13/2018	Annual review and approval by UM Committee
12/12/2019	Annual review and approval by UM Committee
12/10/2020	Annual review and approval by UM Committee
12/10/2021	Annual review and approval by UM Committee
12/21/2022	Annual review and approval by UM Committee
12/20/2023	Annual review and approval by UM/QM Committee
12/23/2024	Annual review and approval by UM/QM Committee
09/30/2025	Annual review and approval by UM/QM Committee
09/29/2026	Annual review and approval by UM/QM Committee

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