

Insurance Criteria for Breast Reductions

1. The patient's BMI (height-to-weight ratio) must be within 20% of their ideal body weight. Most insurance companies require that the patient's BMI be less than 35. This is for two reasons:
 - a. To ensure that the patient is safe for surgery as obesity increases risks of surgery.
 - b. Breast is made up of fatty tissue. As we lose weight, we lose fatty tissue and the size of our breasts shrink naturally.

2. The patient must have a minimum of a three month history of clinical notes supporting medical necessity.
 - a. Insurance companies look for supporting documentation from clinical providers such as a primary-care physician, general practitioner, physical therapist, chiropractor, or gynecologist.
 - b. Insurance companies want to see that a patient struggles with issues such as: headaches, neck and/or back pain, grooving of the shoulders from the bra, and infra-mammary rashes (in between and underneath your breasts).
 - c. Insurance companies want to see that the patient/practitioner has tried to treat these symptoms using conservative medical management. (i.e. Anti-inflammatory medications, muscle relaxers, wide-banded or supportive bras, physical therapy, and/or topical rash creams).

3. Insurance companies want detailed documentation of previous evaluations for your pain demonstrating that other causes for your pain/symptoms have been ruled out. They often like to see that a diagnostic imaging study such as a CT, MRI, or x-ray has been done to rule out conditions such as a musculoskeletal disorder.

***Please have all clinical notes and supporting documentation faxed to our office at (901) 761-6929 ATTN: Brandy. Attached to this information sheet is a medical release that you may use if your doctor's office requires one in order to forward your medical records to our office.**