INSURANCE COVERS PLASTIC SURGERY?
Breast reductions, reconstructions and more!

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Ms. C was a woman in her mid-30s who wore a 36DDD bra. She had chronic back and neck pain for over 10 years, but it worsened after the birth of her second child. Her breasts had been large since puberty and now that she had children, she was tired – tired of the pain in the neck, the back, and shoulders. She was tired of the pain from the bra straps in her shoulders and the difficulty finding comfortable bras. She was tired of dealing with the rashes, especially in the summer.

Ms. C is very much like most of the women a plastic surgeon sees on a daily basis. Some women are blessed or cursed (depending on your perspective) with large breasts and they can have chronic, disabling pain because of them. Many women aren’t aware that there are operations that can be done to significantly improve their lives.

Breast reduction patients are typically some of the happiest patients in a plastic surgeon’s practice because 95 percent of them have either complete relief or significant improvement in their pain. One year after surgery, Ms. C couldn’t be happier. She no longer slouches. She’s happy with how her clothes and her bras fit, she’s still a C cup and she feels very much like the woman she is.

Over 83,000 breast reductions were performed in the United States, according to 2009 statistics compiled by the American Society of Plastic Surgeons. That’s a lot of happy women.

Insurance companies provide coverage for this if it is deemed “medically necessary.” Each insurer is different, but in general they are looking for information on the nature of the size of the breasts and the symptoms associated with them. They want information on the severity of the symptoms and the therapies tried in the past.

Your best sources of information may be the insurer’s web site and your plastic surgeon. Even if you’ve tried to get coverage in the past and been denied, you still have a right to appeal. There is even a state insurance commissioner that has the ultimate say on whether your insurer has to cover this procedure. For more information on our state insurance commissioner, go to http://insurance.ca.gov/.
Breast reconstruction is another area where coverage is provided. In fact, according to the Women's Health and Cancer Rights Act of 1998, it is Federal law that operations to fix the affected breast are covered, but so too are operations on the other side to improve the symmetry or evenness of the reconstruction.

Make sure you talk with your cancer doctor and surgeon and express any interest you may have regarding reconstruction. They can make the referral to a qualified plastic surgeon, certified by the American Board of Plastic Surgery, who accepts insurance and does this procedure frequently.

Discuss with your plastic surgeon your concerns and desires. What kind of result are you looking for? How much down time are you willing to accept? How much risk are you willing to accept? The answers to these questions help you and your plastic surgeon come up with a treatment plan that is right for you.

Mrs. G was a 52-year-old woman who had been diagnosed with breast cancer several years ago and had her breast removed. At the time of her diagnosis, she was too concerned about her cancer and getting back to her life to consider reconstruction. She then completed her chemotherapy and her radiation and went back to work.

Over time, she became fed up with her prosthesis. She had it fall out or become misplaced at embarrassing times. She found it difficult to comfortably wear a bathing suit. She was looking for improvement in how she looked and felt about herself.

Mrs. G opted for an implant reconstruction. Over the course of about 18 months, she underwent four operations to create a breast mound, place a permanent implant, reduce and raise the normal breast to provide a better match, and to create a nipple. Medical grade tattooing was then done to recreate the color of her nipple and areola, matched to her normal side. None of her operations required overnight hospital stays.

Another common operation performed by plastic surgeons that can be covered by insurance is removal of excess skin of the upper eyelids. A test called a visual field test is required to get approval. Usually this is available at your local optometrist or ophthalmologist's office. Eyelid skin that rests on your lashes is a good indicator that your excess skin is severe enough to warrant insurance approval.

Please remember that your plastic surgeon is there to help you receive the care you deserve. However, their ability to help is limited by the insurers. The surgeon provides the information to the insurance company and it is up to the patient to appeal any denials.
With the right criteria satisfied, insurance companies can and do provide coverage for care. Don’t live with the chronic pain of large breasts or the potential anguish of a missing breast if you don’t have to. Review your options with your primary physician and your local Board-certified plastic surgeon.

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