



MEDICAL POLICY STATEMENT

Original Effective Date	Next Annual Review Date	Last Review / Revision Date
07/20/2003		



D. POLICY
I.



VI. **Breast Asymmetry:** For medical necessity and criteria for surgery to correct breast asymmetry see CareSource Medical Policy statement for “Breast Reconstructive Surgery”.

Appendix A: **Schnur Sliding Scale**

Body Surface Area and Minimum Requirement for Breast Tissue Removal	
Body Surface Area m ²	Grams per Breast of Minimum Breast Tissue to be Removed
1.350-1.374	199
1.375-1.399	208
1.400-1.424	218
1.425-1.449	227
1.450-1.474	238
1.475-1.499	249
1.500-1.524	260
1.525-1.549	272
1.550-1.574	284
1.575-1.599	297
1.600-1.624	310
1.625-1.649	324
1.650-1.674	338
1.675-1.699	354
1.700-1.724	370
1.725-1.749	386
1.750-1.774	404
1.775-1.799	422
1.800-1.824	441
1.825-1.849	461
1.850-1.874	482
1.875-1.899	504
1.900-1.924	527
1.925-1.949	550
1.950-1.974	575
1.975-1.999	601
2.000-2.024	628



2.025-2.049	657
2.050-2.074	687
2.075-2.099	717
2.100-2.124	750
2.125-2.149	784
2.150-2.174	819
2.175-2.199	856
2.200-2.224	895
2.225-2.249	935
2.250-2.274	978
2.275-2.299	1022
2.300-2.324	1068
2.325-2.349	1117
2.350-2.374	1167
2.375-2.399	1219
2.400-2.424	1275
2.425-2.449	1333
2.450-2.474	1393
2.475-2.499	1455
2.500-2.524	1522
2.525-2.549	1590
2.550 or greater	1662

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

For Medicare NCD: CMS Publication 100-



E. RELATED POLICIES/RULES

F. REVIEW/REVISION HISTORY

Date Issued: 07/20/2004

Date Reviewed: 07/20/2004, 05/25/2005, 07/5/2006, 09/18/2007, 07/01/2009, 02/2012, 12/31/2014, 12/01/2015

Date Revised: 07/1/2009, 07/2011, 02/2012, 07/2013, 12/31/2014

G. REFERENCES

1. Howrigan P. Reduction and augmentation mammoplasty. *Obstet Gynecol Clin North Am.* 1994; 21(3): 539-543.
2. Miller AP, Zacher JB, Berggren RB, et al. Breast reduction for symptomatic macromastia. Can objective predictors for operative success be identified? *Plastic Reconstruct Surg.* 1995; 95(1):77-83.
3. Schnur PL, Hoehn JG, Ilstrup DM, et al. Reduction mammoplasty: Cosmetic or reconstructive procedure? *Ann Plastic Surg.* 1991; 27(3):232-237.
4. Mosteller RD: Simplified Calculation of Body Surface Area. *N Engl J Med* 1987 Oct 22; 317(17):1098 (letter).
5. Milliman, 19th Edition, 2015.

This guideline contains custom content that has been modified from the standard care guidelines and has not been reviewed or apprmed5.