



<b>TITLE:</b>	EXTERNAL BREAST PROSTHESIS POLICY
<b>POLICY #:</b>	MM-PNP-057
<b>VERSION #:</b>	01
<b>DEPARTMENT:</b>	MEDICAL MANAGEMENT
<b>ORIGINAL EFFECTIVE DATE:</b>	4/12/2024
<b>CURRENT REVISION DATE:</b>	N/A

## 1. PURPOSE

This policy will be used to inform medical necessity decisions related to authorization requests for External Breast Prosthesis.

## 2. SCOPE

Medical UM Department

## 3. DEFINITIONS

Breast prosthesis, mastectomy bra, without integrated breast prosthesis form, any size, any type" describes a bra with pockets that are intended to hold a mastectomy form or breast prosthesis held adjacent to the chest wall. These do not include an integrated breast prosthesis. They may be constructed of any material (e.g., cotton, polyester, or other materials), with any type or location of closure, any size, with or without integrated structural support (e.g., underwire).

"Breast prosthesis, mastectomy bra, with integrated breast prosthesis form, unilateral, any size, any type" and "Breast prosthesis, mastectomy bra, with integrated breast prosthesis form, bilateral, any size, any type" describe a bra with integrated breast prosthesis, either unilateral or bilateral, respectively. They may be constructed of any material (e.g., cotton, polyester, or other materials), with any type or location of closure, any size, with or without integrated structural support (e.g., underwire).

"External breast prosthesis garment, with mastectomy form, post mastectomy" describes a camisole type undergarment with polyester fill used post mastectomy.

A custom fabricated prosthesis is one which is individually made for a specific patient starting with basic materials. "Custom breast prosthesis, post mastectomy, molded to patient model" describes a molded-to-patient-model custom breast prosthesis. It is a particular type of custom fabricated prosthesis in which an impression is made of the chest wall and this impression is then used to make a positive model of the chest wall. The prosthesis is then molded on this positive model.

## 4. RESPONSIBILITIES

Medical UM Department

## 5. POLICY

### Medical Necessity

1. Curative considers external breast prosthesis medically necessary:
  - a. Following a medically necessary mastectomy or lumpectomy; *or*
  - b. For patients with gender dysphoria.
2. Curative considers the following medically necessary:
  - a. Up to six breast prosthesis bras (mastectomy bras):
  - b. Initially following a medically necessary mastectomy; *or*
  - c. For members who have a medically necessary mastectomy form or silicone (or equal) breast prosthesis when the pocket of the bra is used to hold the form/prosthesis; *or*
  - d. For members with gender dysphoria.

**Note:** an initial external breast prosthesis and up to four initial breast prosthesis bras (mastectomy bras) are covered following a medically necessary mastectomy *or* for patients with gender dysphoria. For patients who have had a mastectomy, "initial" applies to a breast prosthesis and bras purchased within one year after the mastectomy is performed, not the first breast prosthesis prescribed after the member's Curatives coverage becomes effective.

3. Up to six breast prosthesis bra (mastectomy bra) replacements every 12 months.
4. An external breast prosthesis garment with mastectomy form for:
5. Use in the post-operative period prior to a permanent breast prosthesis or as an alternative to a mastectomy bra and breast prosthesis; *or*
6. Members with gender dysphoria.
7. Only one breast prosthesis per side for the useful lifetime of the prosthesis.
8. Two breast prostheses, one per side, for:
  - a. Members who have had bilateral mastectomies; *or*
  - b. Members with gender dysphoria.
9. One replacement with silicone breast prostheses every 24 months:
  - a. For fabric, foam, or fiber-filled breast prostheses, replacements are considered medically necessary every 6 months.
  - b. Replacements of nipple prostheses are considered medically necessary every 3 months.
  - c. The medical necessity of more frequent replacements must be documented.
  - d. Three gradient compression lymphedema sleeves ("mastectomy sleeves") initially per affected arm, then two replacements every six months.
  - e. **Note:** The Women's Health and Cancer Rights Act (WHCRA) of 1998 (Public Law #105-277) mandates that all insurance companies provide coverage for breast "prostheses and physical complications of mastectomy including lymphedemas."
10. Curative considers the following not medically necessary:
  - a. A breast prosthesis, silicone or equal, with integrated adhesive is considered not medically necessary because it has not been demonstrated to have a clinical advantage over those without the integrated adhesive.

- b. **Note:** The additional features of a custom-fabricated breast prosthesis, compared to a prefabricated silicone breast prosthesis, are not considered medically necessary.

- External breast prosthesis for the management of developmental breast asymmetry.
- More than one external breast prosthesis.

## 6. PROCEDURE

N/A

## 7. TRAINING REQUIREMENT

- 7.1. All Medical UM associates are responsible for reading and comprehending this procedure. Employees are also responsible for contacting management or Privacy and Compliance with any questions or concerns regarding the information contained within this procedure.

## 8. ENFORCEMENT

Violations of this controlled document will cause the imposition of sanctions in accordance with the Curative sanctions-controlled document. This may include verbal/written warning, suspension, up to termination of employment or volunteer, intern, contractor status with Curative. Additional civil, criminal, and equitable remedies may apply.

## 9. DOCUMENTATION

N/A

## 10. REFERENCE DOCUMENTS AND MATERIALS

- 10.1. Regulatory Authority - N/A

## 11. COLLABORATING DEPARTMENTS

N/A

## 12. DOCUMENT CONTROL

APPROVED BY:		
Charles, Brandon	5/2/2024	
(Printed Name)	(Date)	(Signature)

REVISION HISTORY			
Date	Author	Version	Comments
			Initial Version

## APPENDICES

Any applicable attachments, resources or other materials should be included as appendices in this section. Label each appendix as follows:

**Appendix A:**

N/A