BREAST IMPLANT - REMOVAL AND/OR INSERTION
SUR716.009

COVERAGE:

Coverage will be allowed for:

- Removal of an implant, when there is pain, severe contracture, or mammographic evidence of implant rupture with extrusion of contents into the subcutaneous tissue, or
- Replacement of an implant, when the initial surgery was due to cancer or approved prophylactic mastectomy for a benign disease.

Coverage will not be allowed for removal of silicone gel-filled implant(s) with/without reinsertion of saline-filled implants:

- Due to patient anxiety or fear of implant rupture in the absence of documented symptoms of rupture, chronic pain and/or contracture;
- Due to patient anxiety or fear of cancer risk associated with polyurethane foam-covered breast implants. (NOTE: toluenediamine or TDA, a chemical released from polyurethane foam, has been linked to cancer in animal studies. The evidence shows that the risk of cancer from TDA is negligible. The health risk connected with the surgical removal of the implant(s) is far greater than the risk of developing cancer.);
- For reasons other than documented cancer or approved prophylactic mastectomy for a benign disease;
- Asymmetry considered cosmetic; and,
- During the preexisting provision of their contract, where applicable.

NOTE: If the patient is unable to use saline-filled implants as a replacement for silicone gel-filled implants, the patient must be part of a FDA approved clinical study group/trial to obtain benefits for silicone gel-filled implants. Documentation must accompany the request or claim for silicone gel-filled implant(s). Since 1992, silicone gel-filled implants for breast reconstruction have been available only for women who could not use saline-filled implants, and who agreed to participate in clinical studies.

Examples of documentation include but are not limited to at least two of the following:

- photographs,
- consultations,
- operative reports and/or other applicable hospital records [i.e.: laboratory or pathology report(s), history and physical],
- office records, and/or
DESCRIPTION:

Breast Implant - Removal and/or Insertion is a surgical removal or replacement of either a silicone gel-filled or a saline-filled breast implant with a new implant. Saline implants currently are the only product generally available to women who seek breast implants. Although they have silicone rubber envelopes like silicone gel-filled implants, saline implants present a lower degree of risk than silicone gel-filled implants, according to the FDA, because leakage or rupture would release only salt water into the body.

RATIONALE:

None

DISCLAIMER:

State and federal law, as well as contract language, including definitions and specific inclusions/exclusions, takes precedence over Medical Policy and must be considered first in determining coverage. The member’s contract benefits in effect on the date that services are rendered must be used. Any benefits are subject to the payment of premiums for the date on which services are rendered. Medical technology is constantly evolving, and we reserve the right to review and update Medical Policy periodically. HMO Blue Texas physicians who are contracted/affiliated with a capitated IPA/medical group must contact the IPA/medical group for information regarding HMO claims/reimbursement information and other general polices and procedures.

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