

Coverage and Fair Reimbursement for Customized Breast Prostheses

Issue. Should breast cancer survivors who cannot or are not candidates for, or choose not to have, painful reconstructive surgery be denied an aesthetically and functionally adequate post-mastectomy option?

Background. The American Cancer Society estimates that more than 182,000 women will be diagnosed with breast cancer in 2008. In fact, breast cancer is the most common cancer among women in the United States, other than skin cancer. A woman has about a 1 in 8 chance of having invasive breast cancer during her life. The good news is that there are approximately 2.5 million breast cancer survivors in the United States today, and the disease has become treatable and beatable. However, breast cancer can leave women with the devastating loss of breasts as a result of a mastectomy. For various reasons, some women cannot or choose not to have reconstructive surgery and are left without meaningful options.

Medicare Denies Women a Choice. In 2007, Congress passed an amendment to the Women's Health and Cancer Rights Act of 1998 requiring health plans that provide breast cancer mastectomy benefits to provide coverage for surgical breast reconstruction. There is no requirement, however, for health plans (including Medicare) to pay for external, non-surgical breast reconstruction options. Therefore, while Medicare pays for expensive and invasive reconstructive surgery, women are denied the choice for breast prostheses that are an aesthetically and functionally adequate post-mastectomy option.

Medicare has designated a valid Healthcare Common Procedure Coding System (HCPCS) code for custom breast prostheses, however, carriers continue to deny claims for the customized features that differentiate this product from non-customized, off-the-shelf products. Based upon the "least costly alternative" (LCA) concept, Medicare covers only the off-the-shelf, inferior prostheses and only reimburses a fraction of what it costs to produce customized breast prostheses for patients. Moreover, since private carriers often follow Medicare coverage policy, the LCA stance has more sweeping negative consequences by denying coverage for women of all ages who need breast prostheses.

The Value of Custom Breast Prosthesis Products. Many breast cancer survivors for whom reconstructive surgery was not an option or the right choice desire custom breast prostheses that are very different from off-the-shelf "one-size-fits-all" breast products. Off the shelf forms require special pocketed mastectomy bras that are heavy, hot to wear, and frequently do not provide symmetry in appearance while clothed. Similar to the individualized fit of custom external limbs, breast products are specially fitted to match the anatomical uniqueness of a woman post-mastectomy. In addition, custom breast prostheses are superior in function, form and comfort to off-the-shelf brands, as they are lighter, softer, more natural and comfortable. Moreover, unlike non-customized products, customized prostheses are offered in different skin tones, providing needed options to the many minority women who have breast cancer. Put simply, a custom breast prosthetic product is designed to enable women to resume their normal lives and take part in any activity they enjoyed prior to their treatment, including swimming and other exercise that contributes to general good health.

Recommended Action. Current Medicare policy is simply not cost-effective, nor is it fair to women who have breast cancer. Medicare should reconsider and readjust its coverage and reimbursement policy on breast prostheses to more fairly and adequately cover customized breast prostheses.