



Breast Reduction Insurance Requirements

To gain insurance approval for a breast reduction, you must prove that you have experienced one year or more of the following:

- Interference with normal daily activities due to large breasts – MOST IMPORTANT
- Headaches
- Upper back, neck, or shoulder pain
- Nerve symptoms in the arms
- Rashes, infections, or wounds under the breasts
- Abnormal spinal curvature due to large breasts
- Ruled out other causes of upper back and neck pain, nerve symptoms, breast pain, infections, or wounds.

Required documentation for insurance coverage of the breast reduction surgery

- Medical notes from primary care physician, internal medicine physician, or gynecologist showing:
 - Evaluation for headache, upper back/neck/shoulder pain, breast pain, nerve pain in the arms, rashes/infections/wounds under the breasts CAUSED BY LARGE BREASTS.
 - 6 months or more of conservative treatment including:
 - NSAIDS/Tylenol
 - Physical therapy
 - Chiropractic care
 - Pain management
 - Supervised weight loss (if overweight or obese)
 - Treatment of rashes/infections/wounds with topical or oral antibiotics or antifungals
 - Medical imaging of the cervical spine (if upper back and neck pain)
 - Orthopedic evaluation (if imaging shows cervical spine arthritis)
 - EMG of the upper extremity (if nerve symptoms in the arms)
 - Mammogram
- Notes from physical therapist, chiropractor, or pain management physician

If you do not have established care and received treatment for the symptoms of large breasts, you will need to see your primary care physician or gynecologist and receive at least 6 months of conservative treatment and evaluation as outlines above in order to stand the best chance of getting insurance approval.

Please bring the above documentation with you to your initial consultation.

****Requirements may vary between insurance providers. Call your insurance to check their requirements.**