



A COMPLETE GUIDE TO COVERAGE & APPROVAL

Breast Reduction Insurance

Navigating coverage, medical necessity, and approval
— with an advocate by your side.



For many women, the weight of disproportionately large breasts (*macromastia*) is not just a discomfort — it is a chronic medical condition that impacts musculoskeletal health. The persistent back pain, deep shoulder grooving, and daily strain on your posture are not cosmetic concerns. They are lived, physical realities that affect how you move, sleep, and show up every day.

You may already know that [breast reduction surgery](#) is the clinical solution to these symptoms, but the administrative weight of navigating insurance coverage can feel daunting.

At North Shore Cosmetic Surgery, we believe that accessing medical care should not be blocked by paperwork. We understand that for the vast majority of our patients, this procedure is a **medical necessity**, not a cosmetic choice. Navigating insurance policies can be complex, but you do not have to do it alone.

COSMETIC VS. MEDICAL

Is breast reduction covered by insurance?

The most common question we hear is: "**Is breast reduction covered by insurance?**"

The short answer is yes, in many cases, provided the procedure is deemed "medically necessary" rather than purely cosmetic. Insurance providers distinguish between a desire to change your appearance and a need to alleviate physical pathology.

To secure coverage, we help demonstrate that your symptoms are not incidental or aesthetic, but the direct cause of chronic, ongoing physical strain. **Will insurance cover breast reduction** in your specific case? It largely depends on proving the functional impairment caused by the weight of the breast tissue. Common symptoms that insurers—including plans like NYSHIP, Empire BCBS, and Aetna—look for include:

SYMPTOMS INSURERS LOOK FOR

- **Chronic pain** — persistent pain in the upper back, neck, and shoulders that is not relieved by medication or physical therapy.
- **Shoulder grooving** — deep, painful indentations where bra straps dig into the skin under the weight of the breasts.
- **Skin conditions** — chronic rashes, infections, or maceration in the fold beneath the breasts (intertrigo).
- **Nerve issues** — numbness or tingling in the arms or fingers caused by nerve compression.
- **Restricted activity** — an inability to exercise or perform occupational duties due to physical discomfort.

THE MEDICAL NECESSITY CRITERIA

Understanding the Schnur Scale

One of the primary metrics insurance companies use to determine **how to get a breast reduction covered by insurance** is the amount of tissue to be removed relative to your body surface area. This is often calculated using the **Schnur Scale**. While this may sound overly technical, this is where experience matters. Our role is to translate your symptoms into the precise clinical language insurers require.

While policies vary, insurers generally require a specific minimum amount of tissue — **often 500 grams or more per breast, adjusted for your height and weight** — to be removed to qualify as medically necessary. If the amount is too small, the procedure may be classified as a cosmetic breast lift (mastopexy) and denied.

This is where surgical expertise becomes an act of advocacy. During your consultation, we carefully measure and estimate the tissue reduction to ensure your surgical plan aligns with the strict gram requirements mandated by your specific health plan.



WE HANDLE THE PROCESS FOR YOU

How to get a breast reduction covered by insurance

Securing coverage shouldn't be a second job. Because we understand the documentation checklists for major carriers — including the specific requirements for state and municipal employees — we ensure your file is complete before it leaves our office. Here is how the process works at NSCS:

Step 1 — The consultation & history

It starts with your private consultation. Our team will take a thorough medical history to document non-surgical remedies you may have tried in the past. We will ask about your symptoms and what you have previously done to manage them (such as taking ibuprofen, changing bras, or visiting a chiropractor). This conversation usually provides the essential data we need.

Step 2 — We submit the evidence

You generally do not need to spend months building a "paper trail" or chasing down letters from other doctors. We handle the documentation for you. We submit our comprehensive consultation note, clinical photos, and surgical plan directly to your carrier.

Step 3 — Approval

Most of our patients are approved on the first submission based solely on our consult note. You are not expected to argue your case or prove your pain. That advocacy is our responsibility. There is typically no need to wait 6–12 months or jump through extra hoops. We submit the pre-authorization request, follow up with the carrier, and confirm your coverage eligibility for you.

THE BOTTOM LINE

Don't let the fear of paperwork stop you. Just call our office, and we will walk you through it.

SAFETY & ELIGIBILITY

BMI requirements and safety

A frequent point of confusion involves the [weight requirements for coverage](#).

Insurance companies often have specific Body Mass Index (BMI) requirements. This is not a judgment on your body. It is a safety and efficacy requirement set by the insurer, and one we approach with realism, respect, and support. Some policies state that a patient's BMI must be below a certain threshold (typically around 30 or 32) to ensure that the breast size is not solely attributed to overall body weight.

Furthermore, reaching a stable, healthy weight prior to surgery ensures that the results of the procedure are safer and more permanent. If you are currently outside the BMI range required by your insurer, we can guide you on a timeline that prioritizes your health and safety while keeping your surgical goals in sight.

WHAT IT COSTS

How much is a breast reduction with insurance?

For those asking, "**How much is a breast reduction with insurance?**", the answer depends entirely on your specific plan's deductible, co-pays, and out-of-pocket maximums.

However, the most important question usually isn't "how much," but "will I be approved?"

At North Shore Cosmetic Surgery, our historical data is encouraging. We successfully secure approval for eligible breast reduction patients **more than 90% of the time**. That success comes from preparation, precision, and deep familiarity with how these policies are actually applied.

90%+

of eligible patients we
secure approval for

We have extensive experience obtaining authorizations for teachers, civil servants, and professionals covered by Aetna, BlueCross BlueShield, Cigna, UnitedHealthcare, and **The Empire Plan (NYSHIP)**. The real factor is usually whether your plan includes out-of-network benefits — if it does, we can almost certainly get it done.

The real barrier to coverage is rarely the medical necessity of the surgery—it is simply whether your insurance plan includes Out-of-Network (OON) coverage. If your plan has out-of-network benefits, we can almost certainly get it done. Our team specializes in maximizing these benefits to give you access to premier surgical care that may not be available within strict network directories.

IT'S ABOUT QUALITY OF LIFE

Your Advocate in Restoration

We view breast reduction not just as the removal of tissue, but as the [restoration of your quality of life](#). It is about aligning your body with how you wish to move through the world—without pain, without restriction, and with a renewed sense of function.

“We view breast reduction not just as the removal of tissue, but as the restoration of your quality of life.”

You do not have to fight for your comfort alone. We are here to help you navigate the requirements, submit the necessary evidence, and advocate for the coverage you deserve.

Ready to find relief?

To learn more about our approach and to verify your benefits, visit our [Breast Reduction](#) page. We invite you to schedule a consultation to discuss your symptoms and start your journey toward a life free from pain.

SCHEDULE YOUR CONSULTATION

CALL

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VISIT

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