



**Louisiana Department of Health
Informational Bulletin 16-19
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Breast Reconstruction Post Mastectomy

This bulletin provides notification of changes in coverage of Breast Reconstruction Post Mastectomy. Historically, Louisiana Medicaid only covered breast reconstruction post mastectomy on the affected/diseased breast. Effective with dates of service Oct. 1, 2016 and forward, Medicaid fee-for-service will now cover breast reconstruction post mastectomy of the contralateral unaffected breast to achieve symmetry for patients diagnosed with breast cancer. Breast reconstruction post mastectomy must be prior approved by the fiscal intermediary's Prior Authorization Unit (PAU). Information regarding this policy can be found on www.lamedicaid.com under the Provider Manuals link within the Professional Services Manual.

Please contact the appropriate Managed Care Organization for questions concerning their policies and prior authorization processes. In addition, questions regarding legacy Medicaid should be directed to Molina Provider Relations at 1(800) 473-2783 or (225) 924-5040.