

Department of Origin: Integrated Healthcare Services	Effective Date: 12/03/24
Approved by: Medical Policy Quality Management Subcommittee	Date Approved: 12/03/24
Clinical Policy Document: Panniculectomy, Excision/Removal of Hanging/Redundant Skin/Tissue (includes lipectomy)	Replaces Effective Clinical Policy Dated: 09/16/24
Reference #: MC/G003	Page: 1 of 7

PURPOSE:

The intent of this clinical policy is to ensure services are medically necessary.

Please refer to the member's benefit document for specific information. To the extent there is any inconsistency between this policy and the terms of the member's benefit plan or certificate of coverage, the terms of the member's benefit plan document will govern.

POLICY:

Benefits must be available for health care services. Health care services must be ordered by a provider. Health care services must be medically necessary, applicable conservative treatments must have been tried, and the most cost-effective alternative must be requested for coverage consideration.

Health care services that are *cosmetic* are not considered medically necessary and therefore, not eligible for coverage.

Health care services that are *reconstructive* (ie, performed for an injury, sickness, congenital disease or anomaly) causing a *functional defect/physical impairment* or clinically significant distress or impairment are not considered *cosmetic*.

GUIDELINES:

Medical Necessity Criteria – any of the following: I – III

- I. Aspirus, Inc. Employee Health Plan (Group Plan Number ASP20000) and ETF Health Plan (Wisconsin Department of Employee Trust Funds) – must satisfy any of the following: A – C
 - A. *Panniculectomy* – must satisfy any of the following: 1 – 2
 1. Request due to severity/symptomatology of the *panniculus* – all of the following: a – c
 - a. The severity of the *panniculus* is classified as Grade 2 or more severe (see Attachment A); and
 - b. The symptoms related to *panniculus* have been present for a minimum of 6 months and are unresponsive to conservative management - any of the following: 1) – 3)
 - 1) Persistent *intertrigo*, infection, cellulitis, non-healing ulcers, or skin necrosis; or
 - 2) Difficulty with activities of daily living; or
 - 3) Unresolved back pain attributed to the panniculus, as documented by a physician.
 - c. Documentation includes high-quality color photographs of full-frontal and full-lateral views of the hanging *panniculus*, and full-frontal and full-lateral views of the elevated/lifted *panniculus* documenting any skin damage.
 2. Is incidental to medically necessary lower intra-abdominal surgery to improve surgical access and/or wound healing
 - B. Excision/removal of hanging/redundant skin/tissue other than *panniculectomy* (eg, abdominoplasty, brachioplasty) - documentation supports the following: 1, and either 2 or 3
 1. Symptoms related to excess skin have been present for a minimum of 6 months and are unresponsive to conservative management (if applicable); and

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Reference #: MC/G003	Page: 2 of 7

2. Persistent *intertrigo*, infection, chronic inflammation/irritation, bleeding, pain, or skin necrosis; or
 3. Difficulty with *activities of daily living*.
- C. *Panniculus* or excess/hanging skin/tissue causing a psychological condition – any of the following: 1 or 2
1. Aspirus, Inc. Employee Health Plan (Group Plan Number ASP20000) – all of the following: a and b
 - a. There must be documentation from a *mental health professional*, that the member's clinical condition meets the diagnostic criteria for a *DSM* mental disorder diagnosis (eg, anxiety disorder, major depressive disorder, body dysmorphic disorder) causing *clinically significant* distress or impairment as evidenced by validated scales and measures - must satisfy either of the following: 1) or 2)
 - 1.) Clinically significant distress is defined as a score of 2 standard deviations (SD) from the mean, by a disorder-specific symptom rating scale such as the Appearance Anxiety Inventory; or
 - 2.) Clinically significant impairment is defined as a World Health Organization Disability Schedule (WHODAS) General Disability Score (GDS) of 2.6 using the current 0-4 scoring convention. (See Attachment B).
 - b. Where applicable, there must be documentation that the member has not responded to, is intolerant to, or a poor candidate for other appropriate or conservative treatments for the member's clinical condition (eg, psychotherapy).
 2. ETF Health Plan (Wisconsin Department of Employee Trust Funds) – Psychological reasons do not represent a medical/surgical necessity.
- II. All other plans/groups – The Plan excludes coverage for excision or elimination of hanging skin on any part of the body, including panniculectomy, abdominoplasty, and brachioplasty.

EXCLUSIONS (not limited to):

Refer to member's Certificate of Coverage or Summary Plan Description.

DEFINITIONS:

Activities of Daily Living (ADL):

Activities related to personal self-care and independent living, which include eating, bathing, dressing, transferring, walking/mobility, and toileting/continence.

Cosmetic:

Services and procedures that improve physical appearance but do not correct or improve a physiological function and are not medically necessary.

DSM:

The most current edition of the American Psychiatric Association Diagnostic and Statistical Manual of Mental Health Disorders.

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Reference #: MC/G003	Page: 3 of 7

Functional Defect/ Physical Impairment:

A functional defect or physical/physiological impairment causes deviation from the normal function of a tissue or organ. This results in a significantly limited, impaired, or delayed capacity to move, coordinate actions, or perform physical activities and is exhibited by difficulties in one or more of the following areas: physical and motor tasks; independent movement; performing *activities of daily living*.

Intertrigo:

Dermatitis occurring on opposed surfaces of the skin.

Mental Health Professional:

Licensed Independent Clinical Social Worker, Licensed Psychologist, Psychiatric Advanced Practice Provider, Psychiatrist

Panniculectomy (Abdominal Dermolipectomy):

A resection of the overhanging "apron" of redundant skin and fat in the lower abdominal area.

Panniculus:

Abdominal apron of superficial fat.

Reconstructive:

Surgery to restore or correct:

1. A defective body part when such defect is incidental to or resulting from *injury, sickness*, or prior surgery of the involved body part; or
2. A covered dependent child's congenital disease or anomaly which has resulted in a functional defect as determined by a physician.

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Reference #: MC/G003	Page: 4 of 7

Prior Authorization: Yes, per network provider agreement.

CODING:

CPT®

15830 Excision, excessive skin and subcutaneous tissue (includes lipectomy); abdomen infraumbilical panniculectomy

15832 Excision, excessive skin and subcutaneous tissue (includes lipectomy); thigh

15833 Excision, excessive skin and subcutaneous tissue (includes lipectomy); leg

15834 Excision, excessive skin and subcutaneous tissue (includes lipectomy); hip

15835 Excision, excessive skin and subcutaneous tissue (includes lipectomy); buttock

15836 Excision, excessive skin and subcutaneous tissue (includes lipectomy); arm

15837 Excision, excessive skin and subcutaneous tissue (includes lipectomy); forearm or hand

15838 Excision, excessive skin and subcutaneous tissue (includes lipectomy); submental fat pad

15839 Excision, excessive skin and subcutaneous tissue (includes lipectomy); other area

15847 Excision, excessive skin and subcutaneous tissue (includes lipectomy), abdomen (eg, abdominoplasty) (includes umbilical transposition and fascial plication)

15876 Suction assisted lipectomy; head and neck

15877 Suction assisted lipectomy; trunk

15878 Suction assisted lipectomy; upper extremity

15879 Suction assisted lipectomy; lower extremity

56620 Vulvectomy simple; partial

56625 Vulvectomy complete

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REFERENCES:

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3. Clinical Policy: Cosmetic Procedures/Treatments (MP/C002)
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Reference #: MC/G003	Page: 5 of 7

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Reference #: MC/G003	Page: 6 of 7

Attachment A

Abdominal Deformities Severity Grading Scale From The American Society of Plastic Surgeons

- Grade 1: panniculus covers hairline and mons pubis but not the genitals
- Grade 2: panniculus covers genitals and upper thigh crease
- Grade 3: panniculus covers upper thigh
- Grade 4: panniculus covers mid-thigh
- Grade 5: panniculus covers knees and below

Retrieved from <https://www.plasticsurgery.org/documents/Health-Policy/Guidelines/guideline-2017-skin-redundancy.pdf>

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Reference #: MC/G003	Page: 7 of 7

Attachment B

WHODAS 2.0, 12-items

12-item World Health Organization Disability Assessment Schedule.

In the past 30 days, how much difficulty did you have in. . .

(0) None. (1) Mild. (2) Moderate. (3) Severe. (4) Extreme/Cannot do.

1. Standing for long periods such as 30 minutes?
2. Taking care of your household responsibilities?
3. Learning a new task, for example, learning how to get to a new place?
4. How much of a problem did you have in joining in community activities (for example, festivities, religious or other activities) in the same way as anyone else can?
5. How much have you been emotionally affected by your health problems?
6. Concentrating on doing something for ten minutes?
7. Walking a long distance such as a kilometre (or equivalent)?
8. Washing your whole body?
9. Getting dressed?
10. Dealing with people you do not know?
11. Maintaining a friendship?
12. Your day-to-day work?

The World Health Organisation Disability Assessment Schedule, WHODAS 2.0, 12 items, can be found at:

[https://www.who.int/standards/classifications/international-classification-of-functioning-disability-and-health/who-disability-assessment-schedule#:~:text=Scoring&text=Simple%3A%20the%20scores%20assigned%20to,\(4\)%20%E2%80%93%20are%20summed.](https://www.who.int/standards/classifications/international-classification-of-functioning-disability-and-health/who-disability-assessment-schedule#:~:text=Scoring&text=Simple%3A%20the%20scores%20assigned%20to,(4)%20%E2%80%93%20are%20summed.)

General Disability Score

- < 1.0 = Little or no impairment
- 1.0 to 1.9 = Mild
- 2.0 to 2.9 = Moderate
- 3.0 to 3.9 = Severe
- 4.0 = Extreme or cannot do

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- Written information in other formats (large print, audio, accessible electronic formats, other formats)

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- Qualified interpreters
- Information written in other languages

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PreferredOne Community Health Plan
PO Box 59052
Minneapolis, MN 55459-0052
Phone: 1.800.940.5049 (TTY: 763.847.4013)
Fax: 763.847.4010
customerservice@preferredone.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, a Grievance Specialist is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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ဟံသာဝတီ: နမူနာတို့ ကညီ ကျိန်အယိ, နမူနာ ကျိန်အတိအကျတို့ တလက်တလက်စွာ နှိပ်စက်သွန်သိုလိမ့်။ ကိ: 1.800.940.5049 (TTY: 763.847.4013).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1.800.940.5049 (TTY: 763.847.4013).

ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយភាសា ដោយឥតគិតថ្លៃ គឺអាចមានសំរាប់អ្នក។ ហៅ 1.800.940.5049 (TTY: 763.847.4013).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1.800.940.5049 (رقم هاتف الصم والبكم: 763.847.4013).

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1.800.940.5049 (TTY: 763.847.4013).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1.800.940.5049 (TTY: 763.847.4013). 번으로 전화해 주십시오.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1.800.940.5049 (TTY: 763.847.4013).