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REQUIREMENTS FOR PANNICULECTOMY SURGERY CPT Codes 15830 and 15847

Insurance companies have certain requirements for panniculectomy surgeries to meet medical necessity.

Below is a list of the **MINIMUM** requirements. This is not an all-inclusive list. Certain insurance payers have additional criteria. It is the patient's responsibility to determine if the codes are covered benefits with their specific insurance plan.

- Pannus (skin of the lower abdomen) has to hang <u>AT</u> or <u>BELOW</u> the level of the pubis. This has to be documented in pictures.
- Evidence of extreme rashing, boils, ulceration, etc. We will need pictures that clearly document the rashing.
- Medication names prescribed by physicians <u>specifically</u> to treat the rashing caused by the excessive skin of the pannus. Treatments with medications need to be for a <u>MINIMUM</u> of <u>3 MONTHS</u> duration.
- Documented stable weight of <u>AT LEAST</u> the past 6 months. For patients who are post bariatric surgery, patient needs to be <u>AT LEAST</u> 18 months out from surgery. Some insurance plans require a 24 month period.
- At least <u>ONE</u> supporting letter or chart notes from another physician that documents/supports the need for this surgery and that past treatments have failed. This period of time needs to be a <u>MINIMUM</u> of <u>3 MONTHS</u> of failed treatment.

I have read and understand the above requirements. I also understand that obtain an approval from insurance does not guarantee payment.	
Patient Name	 Date

