

# City of Livonia MA Plan Mastectomy sleeves

Applies to:



**Blue Cross  
Blue Shield**  
of Michigan

A nonprofit corporation and independent licensee  
of the Blue Cross and Blue Shield Association

Medicare Plus Blue<sup>SM</sup> PPO  Medicare Plus Blue<sup>SM</sup> Group PPO  Both

## Mastectomy sleeve

A mastectomy sleeve is commonly used to prevent and treat lymphedema, which may occur after breast cancer surgery if the natural flow of lymph fluid is disrupted, causing pain and severe swelling in the arm.

## Original Medicare

Original Medicare doesn't cover mastectomy sleeves because it doesn't meet the definition of a prosthesis.

## Medicare Plus Blue<sup>SM</sup> PPO enhanced benefit

Medicare Plus Blue is a Medicare Advantage plan, which provides at least the same level of benefit coverage as Original Medicare (Part A and Part B) and may provide enhanced benefits beyond the scope of Original Medicare within a single health care plan. This flexibility allows Blue Cross to offer enriched plans by using Original Medicare as the base program and adding desired benefit options.

Coverage for HCPCS code L8010 – breast prosthesis, mastectomy sleeve – is provided to members under the City of Livonia Medicare Plus Blue Group PPO plan. Because Original Medicare doesn't cover mastectomy sleeves, the group determines the scope of benefit, reimbursement methodology, maximum payment amounts, and the member's cost sharing.

## Conditions for payment

The table below specifies payment conditions for mastectomy sleeves.

Conditions for payment	
Eligible provider	DME / Prosthetics and Orthotics supplier
Payable location	No restrictions
Frequency	2 units per 12 months, per individual
HCPCS codes	L8010 Mastectomy sleeve
Diagnosis restrictions	No restrictions
Age restrictions	No restrictions

Blue Cross Blue Shield of Michigan

[bcbsm.com/provider/ma](https://bcbsm.com/provider/ma)

## Reimbursement

Medicare Plus Blue Group PPO plan's maximum payment amount for mastectomy sleeves obtained from a Northwood provider is available by contacting Northwood, Inc at [provideraffairs@northwoodinc.com](mailto:provideraffairs@northwoodinc.com). Medicare Plus Blue Group PPO plan's maximum payment amount for mastectomy sleeves obtained from a non-Northwood provider is available on our provider website on the Medicare Plus Blue Enhanced Benefits [Fee Schedule](#). The provider will be paid the lesser of this amount or the providers charge, minus the member's cost share. This represents payment in full and providers aren't allowed to balance bill the member for the difference between the allowed amount and the charge.

## Member cost sharing

No member cost sharing. Mastectomy sleeves are covered at 100%.

- If the member elects to receive a noncovered service, he or she is responsible for the entire charge associated with that service.
- Providers may not have members sign an ABN to accept financial responsibility for noncovered items or services. If there is any question about whether an item or service is covered, seek a coverage determination from Blue Cross before providing the item or service to the member. If a provider provides a noncovered item/service to a member without first obtaining a coverage determination, the member must be held harmless for all charges except for any applicable cost share.

To verify benefits and cost share, providers may utilize our provider portal or call 1-866-309-1719.

## Billing instructions for providers

1. Bill services on either the CMS 1500 (02-12), UB-04 or 837 equivalent claim form.
2. Use the Medicare Advantage PPO unique billing requirements.
3. Report CPT/HCPSC codes and diagnosis codes to the highest level of specificity.
4. Report your National Provider Identifier number on all claims.
5. Use electronic billing:
  - a. Michigan providers – Copies of the ANSI ASC X 12N 837 and 835 Institutional Health Care Claim and Health Care Claim Payment/Advice (Blue Cross Electronic Data Interchange (EDI) Institutional 837/835 Companion Documents) are available on the Blue Cross website under the reference library section at:
  - b. Providers outside of Michigan should contact their local Blue Cross plan.
6. Send your electronic and/or paper claims to your local Blue Cross plan.
7. Send paper claims to the following address:

Medicare Plus Blue  
Blue Cross Blue Shield of Michigan  
P.O. Box 32593  
Detroit, MI 48232-0593

## Revision history

Policy number: MAPPO 1008

Effective: 01/01/2023

Reviewed: 10/15/2024, 12/8/2023

Revised: 10/24/2024

10/24/2024: Added DME/POS vendor maximum payment amount information.