HEALTH INSURER

123 Insurance Way

Anywhere, IL 012345

DATE

RE: Claim # XXXXXXXXXXX

Insured: NAME (ID# XXXXXXXXXXX)

Claimant: NAME (DOB Mo-Day-Year)

To Whom It May Concern:

I am writing to appeal the decision to [deny coverage or apply the cost of the services to my deductible] of my prophylactic bilateral mastectomy by [Health Plan Name]. Genetic testing confirmed that I carry a mutation in the XXX [insert mutation type as appropriate] gene which puts me at significantly increased risk of breast cancer. With this inherited mutation [and my family history of cancer] my lifetime risk of breast cancer ranges from 32% to over 60%. The U.S. Preventive Services Task Force (USPSTF) BRCA-Related Cancer: Risk Assessment, Genetic Counseling, and Genetic Testing guidelines give a “Grade: B” to screening women with a personal or family history of breast, ovarian, tubal, or peritoneal cancer. “Women with a positive result on the risk assessment tool should receive genetic counseling and, if indicated after counseling, genetic testing.”[[1]](#footnote-2)

The clinical value of identifying people with a genetic mutation placing them at high risk of cancer lies in an individual’s ability to access appropriate, evidence-based screening and preventive services that lower their cancer risk for breast cancer.  As such, USPSTF guidelines indicate, “In general, women with harmful *BRCA1/2* mutations are managed with a variety of interventions to lower future cancer risk. This includes intensive screening, risk-reducing medications, and risk-reducing mastectomy and salpingo-oophorectomy.”1 [Exhibit A]

While the USPSTF does not address [my mutation], National Comprehensive Cancer Network (NCCN) guidelines state that risk-reducing mastectomy (RRM) should be an option for women like me [include ‘especially with my family history of breast cancer’ if appropriate] [Exhibit B]. The efficacy of this surgery for reduction of breast cancer risk is unparalleled. The National Cancer Institute says, “Bilateral mastectomy has been shown to reduce the risk of breast cancer by at least 95% in women who have a harmful (disease-causing) variant ... and up to 90% in women who have a strong family history of breast cancer.”[[2]](#footnote-3)

There is broad consensus among clinical organizations about risk-reducing surgery for women with mutations. The American College of Obstetricians and Gynecologists (ACOG) [Exhibit C], European Society for Medical Oncology (ESMO) Annals of Oncology [Exhibit D] and the National Cancer Institute [Exhibit E] and others recommend the option of RRM for women with BRCA and other mutations.

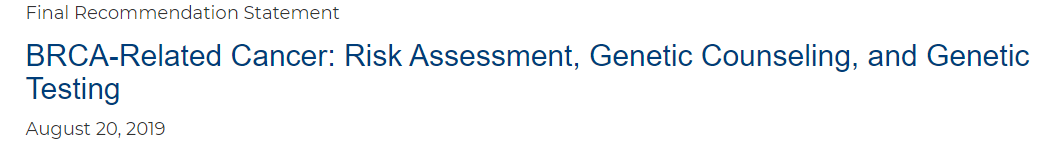
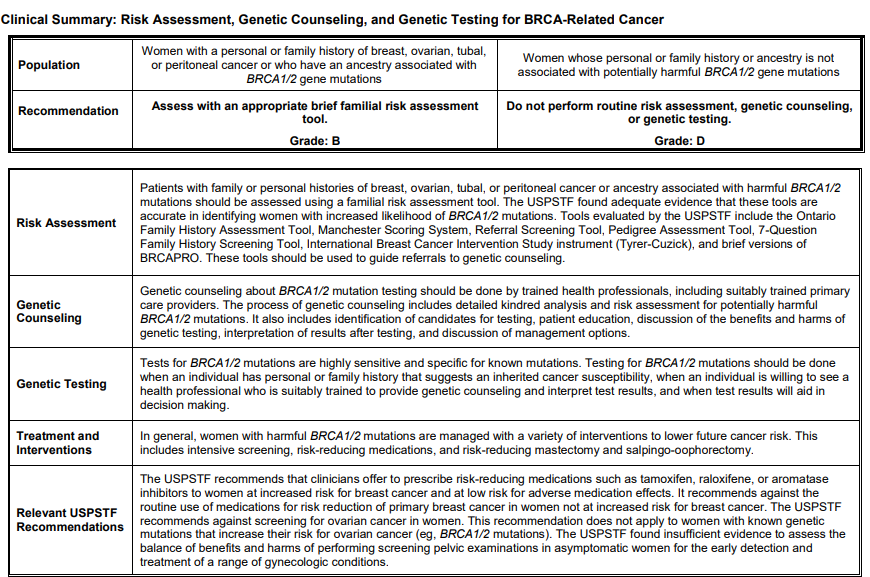
Most insurers, including Aetna, consider “prophylactic mastectomy medically necessary for reduction of risk of breast cancer” in high-risk women [Exhibit F]. No woman wants to remove her breasts but given the exceptional risk of cancer, women with these mutations face a difficult choice—live in constant fear with the threat of aggressive and often fatal cancer or opt for surgery to help maintain one’s health.

Given my significant breast cancer risk, this surgery meets the criteria for medical necessity. Thank you for your consideration. With the evidence provided herein, I respectfully request that you allow me to be proactive with my health. Ultimately, the cost of risk-reducing mastectomy with reconstruction is far less expensive than a breast cancer diagnosis—which would involve not only surgery and reconstruction, but chemotherapy, radiation, extensive time out of work, etc. Thank you for your consideration. Your prompt attention to this appeal is greatly appreciated.

Sincerely,  
  
[Signature]

**Exhibit A**

Source: <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/brca-related-cancer-risk-assessment-genetic-counseling-and-genetic-testing>



**Exhibit B**

A screenshot of a medical form

AI-generated content may be incorrect.

**Exhibit B** **(continued)**

**A screenshot of a medical form

AI-generated content may be incorrect.**

**Exhibit B** **(continued)**

**A screenshot of a computer

AI-generated content may be incorrect.**

**Exhibit B (continued)**

A screenshot of a medical document

AI-generated content may be incorrect.

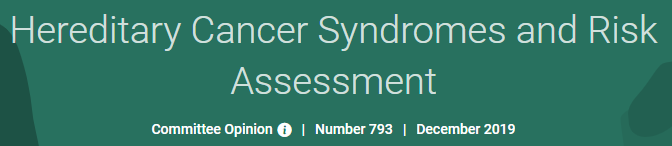
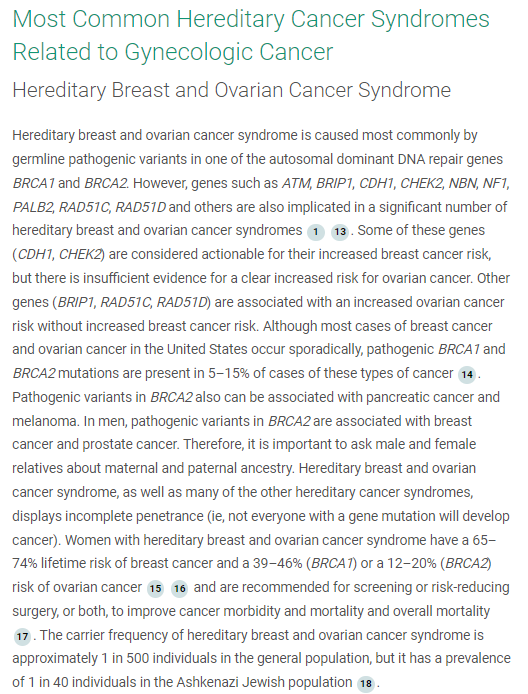
**Exhibit B (continued)**

A screenshot of a computer

AI-generated content may be incorrect.

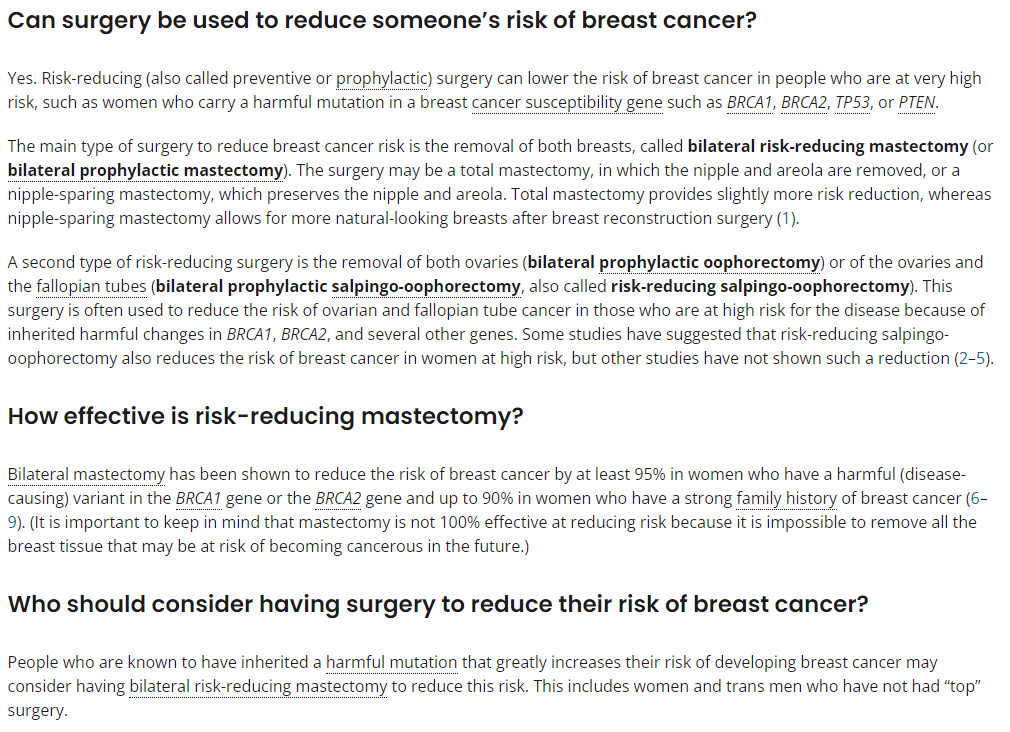
Source: https://www.nccn.org/professionals/physician\_gls/pdf/genetics\_bopp.pdf

**Exhibit C**



Source: https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2019/12/hereditary-cancer-syndromes-and-risk-assessment

**Exhibit D**



Source: <https://www.cancer.gov/types/breast/risk-reducing-surgery-fact-sheet>

1. BRCA-Related Cancer: Risk Assessment, Genetic Counseling, and Genetic Testing, December 2019  
   (https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/brca-related-cancer-risk-assessment-genetic-counseling-and-genetic-testing1) [↑](#footnote-ref-2)
2. # Surgery to Reduce the Risk of Breast Cancer (www.cancer.gov/types/breast/risk-reducing-surgery-fact-sheet)

   [↑](#footnote-ref-3)