



**BlueCross BlueShield  
of Vermont**

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## **Corporate Medical Policy Cranial/ Scalp/Wig Prosthesis**

**File name:** Cranial/Scalp/Wig Prosthesis

**Origination:** 4/12/01

**Last Review:** 2/07

**Next Review:** 2/08

**Effective Date:** 3/11/08

### ***Description***

A hairpiece of human or artificial hair worn as personal adornment or to conceal baldness. A wig or hairpiece is a prosthetic supply for hair loss.

### ***Policy***

Benefits are subject to all terms, limitations and conditions of the subscriber contract.

Prior approval may be required subject to all terms, limitations and conditions of the subscriber contract.

For New England Health Plan (NEHP) members an approved referral authorization is required.

Only one cranial/scalp/wig prosthesis per calendar year is considered medically necessary.

The Plan will provide benefits, in accordance with specific certificate requirements, for one synthetic or natural (non-synthetic) wig/cranial/scalp prosthesis per year. This benefit, if available, in the subscriber's contract is to be processed under the medical equipment and supplies benefit with any applicable deductibles and coinsurances, co-payments and subject to any benefit maximums.

### ***When service or procedure is covered***

The Plan considers wigs (cranial/scalp prosthesis) medically necessary, when due to the following conditions:

- Chemotherapy
- Radiation therapy
- Scalp injury
- Severe burns
- Medical conditions such as alopecia totalis that can be documented by tests or other diagnostic methods
- Medical conditions which are actively being treated by generally accepted treatment which have resulted in hair loss; or
- Congenital anomalies of hair growth

### ***When service or procedure may not be covered***

Cranial prosthesis is not considered medically necessary when the above conditions are not met.

The Plan does not consider wigs (cranial/scalp prostheses) medically necessary if balding or hair loss is due to:

- Natural aging process
- Premature balding at a young age
- Male/Female pattern baldness, or
- Medical conditions which are not a covered diagnosis

### ***Billing and Coding/Physician Documentation Information***

See Attachment I for coding information.

### ***Eligible Providers***

The Plan does not require members to purchase cranial prosthesis from a medical equipment and supplies provider.

Reimbursement will be at the preferred deductible and coinsurance level of benefit up to the allowable charge

### ***Policy Implementation/Update information***

5/03 added covered ICD-9 diagnoses codes, 01/03 updated to include language clarifying benefit and location of purchase, 10/02, Updated to clarify allowance, policy dated 08/15/95 Wigs/Cranial Prosthesis signed by Frank Balco, Sr. Vice President, 2/05 update to allow TVHP to use same guidelines as BCBSVT, 2/06 updated for HCPCS coding and ICD9 coding, eligible provider and reimbursement language updated

2/07 annual review, minor wording changes only. Reviewed by CAC 05/07.

2/08 annual review. No changes made. Reviewed by the CAC 3/08.

### ***Scientific Background and Reference Resources***

Blue Cross and Blue Shield of Massachusetts Wigs updated 1/5/06, Blue Cross and Blue Shield of Florida Medical Policy Wigs (Cranial Prosthesis) updated 1/06

***Approved by BCBSVT:      Date Approved***

Stephen E. Perkins, M.D.

**Attachment I- Cranial/Scalp/ Wig Prosthesis**

Covered Procedure Code	Covered Diagnosis Code
HCPCS - A9282 wig, any type	<b>V58.1-V58.11</b> - Chemotherapy
	<b>V66.1</b> , Following radiotherapy; <b>V66.2</b> – Following chemotherapy
	<b>091.82</b> Syphilitic alopecia
	<b>140.0 – 208.91</b> - Malignant neoplasm of lip, oral cavity, and pharynx, (140-149); of digestive organs and peritoneum (150-159); of respiratory and intrathoracic organs, (160-165); of bone, connective tissue, skin, & breast, (170-176); of genitourinary organs, (179-189); of other and unspecified sites, (190- 199); of lymphatic and hemotopoietic tissue, (200-208).
	<b>230-234.9</b> – Carcinoma in situ
	<b>235-238.9</b> - Neoplasms of uncertain behavior
	<b>239.0 – 239.9</b> – Neoplasms of unspecified nature
	<b>704.0 – 704.9</b> – Diseases of hair and hair follicles
	<b>757.4</b> – Specified anomalies of hair
	<b>941.0 – 941.59</b> – Burns, face head and neck; first, second and third degree burns, deep necrosis of underlying tissue.

