

Policy Number: CP-IFP22-025A

Effective Date: April 1, 2022

DME: SCALP HAIR PROSTHESIS (WIGS)

Coverage is available for wigs for a defined condition only as required by Mn Statute 62A.28. Wigs may also be referred to as scalp hair prosthesis or cranial scalp prosthesis.

DISCLAIMER

Coverage Policies are developed to assist in identifying coverage for UCare benefits under UCare’s health plans. They are intended to serve only as a general reference regarding UCare’s administration of health benefits and are not intended to address all issues related to coverage for health services provided to UCare members.

These services may or may not be covered by all UCare products (refer to product section of individual coverage policy for product-specific detail). Providers are encouraged to have their UCare patient refer to their UCare plan documents (Evidence of Coverage/Member Handbook/Member Contract) for specific coverage information. If there is a conflict between a coverage policy and the UCare plan documents, the UCare plan documents prevail.

Coverage Policies do not constitute medical advice. Providers are responsible for submission of accurate and compliant claims.

PRODUCT SUMMARY

This coverage policy applies to the following UCare products:

UCARE PRODUCT	APPLIES TO
Individual and Family Plans (IFP), IFP with M Health Fairview	✓
UCare Medicare Plans, UCare Medicare with M Health Fairview and North Memorial, UCare Advocate (I-SNP), EssentiaCare	
Minnesota Senior Health Options (MSHO)	
UCare Prepaid Medical Assistance (PMAP), MNCare	
Connect	
Connect +Medicare	
MSC +	

Benefit Category:

DURABLE MEDICAL EQUIPMENT-member deductible and coinsurance cost share applies

Definitions or Summary

Required coverage under *Mn Statute 62A.28 COVERAGE FOR SCALP HAIR PROSTHESES*.

Every policy, plan, certificate, or contract referred to in subdivision 1 issued or renewed after August 1, 1987, must provide coverage for scalp hair prostheses worn for hair loss suffered as a result of alopecia areata.

The coverage required by this section is subject to the co-payment, coinsurance, deductible, and other enrollee cost-sharing requirements that apply to similar types of items under the policy, plan, certificate, or contract and may be limited to one prosthesis per benefit year.

Alopecia Areata- a condition that causes round patches of hair loss that can lead to total hair loss. It is thought to be an **autoimmune condition** that occurs when the immune system mistakenly attacks and destroys healthy hair follicles.

There are other types of alopecia that affect other parts of the body. These conditions are separate and **DO NOT** meet the language of the mandate for coverage.

- **Alopecia totalis** — Total loss of the hair on the scalp.
- **Alopecia universalis** — Complete loss of hair on the scalp, face, and body.
- **Androgenic alopecia** - is common for women and men. It's also known as male- or female-pattern hair loss.

Coverage Policy

COVERED

- A prescription from health care provider indicating the diagnosis of alopecia areata is required.
- One prosthesis (wig) per person per calendar year.
- Scalp hair prostheses (wigs) for hair loss due to alopecia areata only.
- Wigs can be obtained at a salon, retail store or online and member may submit receipt for reimbursement under this benefit using the Health Care Expense Claim Form.

NOT COVERED

Wigs for any condition other than alopecia areata including but not limited to hair loss due to:

- Alopecia totalis
- Alopecia universalis
- Androgenic alopecia
- Chemotherapy
- Dermatological conditions
- Fungal infections
- Injury resulting in hair loss
- Medication
- Nutritional deficiencies
- Pregnancy

Prior Authorization
Not required

Related Policies and Documentation	
REFERENCES TO OTHER POLICIES OR DOCUMENTATION THAT MAY BE RELEVANT TO THIS POLICY.	
POLICY NUMBER	POLICY DESCRIPTION
CP-IFP21-006A	DME

References and Source Documents
LINKS TO UCARE CONTRACT, CMS, MHCP, MINNESOTA STATUTE AND OTHER RELEVANT DOCUMENTS USED TO CREATE THIS POLICY.
2022 Individual & Family Plans Member Documents and Information https://home.ucare.org/en-us/health-plans/ifp/benefit-documents/
2022 Health Care Expense Claim Form https://media.ucare.org/-/media/documents/public/misc-forms/u6976c_ifp_healthcareexpenseclaimreimbursementform.pdf
Minnesota Statute 62A.28 https://www.revisor.mn.gov/statutes/cite/62A

Coverage Policy Development and Revision History		
VERSION	DATE	NOTE/S
V1	04/01/2022	New policy