

Wigs

Policy Number: ADMINISTRATIVE 296.2 T2
Effective Date: November 1, 2022

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Related Policy

- [Prosthetic Devices, Wigs, Specialized, Microprocessor or Myoelectric Limbs](#)

Applicable Lines of Business/Products

This policy applies to Oxford Commercial plan membership.

Purpose

The purpose of this document is to discuss Oxford's policy on wigs/scalp hair prosthesis.

Prior Authorization Requirements

Prior authorization is required in all sites of service.

Note: For New Jersey Large groups new or renewing on 10/01/22 and after, prior authorization requirements will be required.

Policy

Coverage for wigs is based upon State Mandates.

- Connecticut (CT) Groups: Wigs are included in coverage for Connecticut (CT) groups when:
 - A member suffers hair loss due to a result of chemotherapy or radiation therapy; and
 - The wig is prescribed by a licensed oncologist.
- New York (NY) Groups: Wigs are included in coverage for New York (NY) groups when the member has severe hair loss due to injury, disease or as a side effect of the treatment of a disease. Coverage is limited to one wig per member, per lifetime.
- New Jersey (NJ) Large Groups: Wigs are included in coverage for New Jersey (NJ) Large groups when the member has severe hair loss due to injury, sickness or as a side effect of the treatment of a disease. Coverage is limited to one wig per member, per lifetime.

Severe hair loss due to injury, disease and/or sickness includes:

- Alopecia areata

- Alopecia totalis
- Burns to the scalp
- Chemotherapy
- Congenital baldness
- Lupus
- Radiation therapy
- Traumatic injury to the head/scalp
- Any condition that results in severe hair loss not listed above

Exceptions

- NJ Small products do not provide coverage for wigs
- Applicable state taxes
- Coverage is not available for repair or replacement of the wig due to misuse, malicious damage, gross neglect, or to replace a lost or stolen wig
- Hair implants or hair plugs
- Human hair (unless an allergy exists to a synthetic wig)
- Natural or premature aging (female pattern baldness, male pattern baldness, androgenetic alopecia)
- Pregnancy or postpartum alopecia
- Styling, coloring, or color correction

Procedures and Responsibilities

Billing Requirements

- The member's treating physician must prescribe the wig.
- An itemized invoice including but not limited to the price for the wig, any taxes or service charge, etc.
- Proof of Payment (e.g., credit card receipt, check copy). An invoice marked "paid" will not count as proof of payment.
- Invoice must state synthetic or human hair.

Medial Notes Requirements

- Medical notes documenting the history and severity of the hair loss.
- Diagnosis must be specific to an injury or disease.
- If the wig is human hair, medical documentation must be submitted detailing the allergy to synthetic wigs.

Applicable Codes

The following list(s) of procedure and/or diagnosis codes is provided for reference purposes only and may not be all inclusive. Listing of a code in this policy does not imply that the service described by the code is a covered or non-covered health service. Benefit coverage for health services is determined by the member specific benefit plan document and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other Policies may apply.

HCPCS Code	Description
A9282	Wig, any type, each

Diagnosis Code	Description
L63.0	Alopecia (capitis) totalis
L63.1	Alopecia universalis
L63.2	Ophiasis
L63.8	Other alopecia areata
L63.9	Alopecia areata, unspecified
L64.0	Drug-induced androgenic alopecia

Diagnosis Code	Description
L65.1	Anagen effluvium
L65.2	Alopecia mucinosa
L66.2	Folliculitis decalvans
L66.8	Other cicatricial alopecia
L66.9	Cicatricial alopecia, unspecified
L93.0	Discoid lupus erythematosus
L93.1	Subacute cutaneous lupus erythematosus
L93.2	Other local lupus erythematosus
M32.0	Drug-induced systemic lupus erythematosus
M32.10	Systemic lupus erythematosus with organ or system involvement
M32.19	Other organ or system involvement in systemic lupus erythematosus
M32.8	Other forms of systemic lupus erythematosus
M32.9	Systemic lupus erythematosus, unspecified
Q84.0	Congenital alopecia
Q84.1	Congenital morphological disturbances of hair, not elsewhere classified
T20.05XA	Burn of unspecified degree of scalp [any part], initial encounter
T20.05XD	Burn of unspecified degree of scalp [any part], subsequent encounter
T20.05XS	Burn of unspecified degree of scalp [any part], sequela
T20.15XA	Burn of first degree of scalp [any part], initial encounter
T20.15XD	Burn of first degree of scalp [any part], subsequent encounter
T20.15XS	Burn of first degree of scalp [any part], sequela
T20.25XA	Burn of second degree of scalp [any part], initial encounter
T20.25XD	Burn of second degree of scalp [any part], subsequent encounter
T20.25XS	Burn of second degree of scalp [any part], sequela
T20.35XA	Burn of third degree of scalp [any part], initial encounter
T20.35XD	Burn of third degree of scalp [any part], subsequent encounter
T20.35XS	Burn of third degree of scalp [any part], sequela
T20.45XA	Corrosion of unspecified degree of scalp [any part], initial encounter
T20.45XD	Corrosion of unspecified degree of scalp [any part], subsequent encounter
T20.45XS	Corrosion of unspecified degree of scalp [any part], sequela
T20.55XA	Corrosion of first degree of scalp [any part], initial encounter
T20.65XA	Corrosion of second degree of scalp [any part], initial encounter
T20.75XA	Corrosion of third degree of scalp [any part], initial encounter
T45.1X5A	Adverse effect of antineoplastic and immunosuppressive drugs, initial encounter
T45.1X5S	Adverse effect of antineoplastic and immunosuppressive drugs, sequela
Z51.0	Encounter for antineoplastic radiation therapy
Z51.11	Encounter for antineoplastic chemotherapy
Z51.12	Encounter for antineoplastic immunotherapy
Z92.21	Personal history of antineoplastic chemotherapy
Z92.3	Personal history of irradiation

References

Connecticut Public Act No. 04-34; Connecticut General Statutes Sections 38a-504 and 38a-542.

Connecticut: H.B. 5464, Public Act 04-34.

NJ Insurance Law (N.J.S.A. 17B:27-46.1ff).

NJ Law P.L. 2007, c.345.

Oxford Certificates of Coverage and Member Handbooks.

Policy History/Revision Information

Date	Summary of Changes
11/01/2022	<p data-bbox="337 539 760 573">Procedures and Responsibilities</p> <ul data-bbox="337 577 1511 640" style="list-style-type: none"><li data-bbox="337 577 1511 640">• Replaced language indicating “medical notes <i>stating the reason for</i> the hair loss [are required]” with “medical notes <i>documenting the history and severity of</i> the hair loss [are required]” <p data-bbox="337 644 639 678">Supporting Information</p> <ul data-bbox="337 682 1068 709" style="list-style-type: none"><li data-bbox="337 682 1068 709">• Archived previous policy version ADMINISTRATIVE 296.1 T2

Instructions for Use

The services described in Oxford policies are subject to the terms, conditions and limitations of the member's contract or certificate. Oxford reserves the right, in its sole discretion, to modify policies as necessary without prior written notice unless otherwise required by Oxford's administrative procedures or applicable state law. The term Oxford includes Oxford Health Plans, LLC and all of its subsidiaries as appropriate for these policies.

Certain policies may not be applicable to Self-Funded members and certain insured products. Refer to the member specific benefit plan document or Certificate of Coverage to determine whether coverage is provided or if there are any exclusions or benefit limitations applicable to any of these policies. If there is a difference between any policy and the member specific benefit plan document or Certificate of Coverage, the member specific benefit plan document or Certificate of Coverage will govern.