



KAISER PERMANENTE[®]

Mid-Atlantic States

Hair Prosthesis (Wigs)

Medical Coverage Policy

UTILIZATION * ALERT*

- Prior to use of this MCP for evaluation of medical necessity, members benefits MUST be verified as benefit coverage for wigs including repair and replacement, maximum covered amount per occurrence and lifetime and/or annual maximums dollar amount vary by line of business, group plans and state mandates.
 - For Medicare members, please consult the Medicare coverage database. Wigs are classified as Durable Medical Equipment for Medicare members.
 - Note: After searching the Medicare Coverage Database, if no NCD/LCD/LCA is found, then use the policy referenced above for coverage guidelines
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I. Procedure: Hair Prosthesis (Wigs)

- II. **Specialties:** DME, oncology, dermatology, rheumatology, plastic surgery, general surgery, psychiatry

III. Referral Guidelines

A. Clinical Guidelines

Hair prosthesis is considered medically necessary when all of the following requirements are met:

1. The member's benefit includes coverage for hair prosthesis and the service provided is within the scope of the member's benefit contract; and
2. The member meets all of the following criteria:
 - a. The hair prosthesis is prescribed by a treating physician; and
 - b. Significant hair loss was the result from any of the following:
 - i. Effects of chemotherapy or radiation therapy; or
 - ii. Treatment for any form of cancer; or
 - iii. Scarring alopecia, including to but not limited to conditions due to infection, chemicals, burns or autoimmune disorders; or
 - iv. Alopecia areata; or
 - v. Alopecia universalis; or
 - vi. Alopecia totalis



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B. Limitations and Exclusions

Hair prosthesis is not medically necessary and considered not covered for any of the following:

1. Hair loss due to natural or premature aging such as female-pattern baldness, male-pattern baldness, or androgenetic alopecia; or
2. Pregnancy or postpartum alopecia; or
3. Repair or replacement of hair prosthesis due to misuse, gross neglect, or malicious damage; or
4. Replacement of lost or stolen wig; or
5. Hair implants; or
6. Human hair (unless an allergy exists to a synthetic wig); or
7. Cosmetic purposes such as but not limited to the following:
 - a. Hair plugs or hair extensions; or
 - b. Styling, coloring, or color correction of wigs

References:

1. Maryland General Assembly. 2022 Maryland Statutes Insurance §15-836: Title 15 - Health Insurance, Subtitle 8 - Required Health Insurance Benefits, Section 15-836 - Hair Prosthesis. Accessed 11/27/2023. <https://mgaleg.maryland.gov/mgawebsite/Laws/StatuteText?article=gin§ion=15-836&enactments=False&archived=False>
2. McGovern JP. Text - H.R.5430 - 117th Congress (2021-2022): to Amend title XVIII of Social Security Act to provide coverage for wigs as durable medical equipment under the Medicare program, and for other purposes. Congress.gov. Available from: <https://www.congress.gov/bill/117th-congress/house-bill/5430/text>. 2021. Accessed 11/27/23. <https://www.govinfo.gov/content/pkg/BILLS-116hr3332ih/pdf/BILLS-116hr3332ih.pdf>
3. Ezemma, O., Devjani, S., Lee, A., Kelley, K. J., Anderson, L., Friedland, N., & Senna, M. (2023). Patterns of insurance coverage for wigs in patients with alopecia areata: a cross-sectional survey. *International journal of women's dermatology*, 9(1), e075. <https://doi.org/10.1097/JW9.0000000000000075> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9916017/>
4. Messenger AG, McKillop J, Farrant P, McDonagh AJ, Sladden M. British Association of Dermatologists' guidelines for the management of alopecia areata 2012. *Br J Dermatol* 2012; 166:916–26. doi:10.1111/j.1365-2133.2012.10955. <https://onlinelibrary.wiley.com/doi/full/10.1111/j.1365-2133.2012.10955.x>
5. Rinderknecht, F. A., Nambudiri, V., Lee, M. S., LaChance, A., & Mostaghimi, A. (2023). Expanding Wig Coverage under Medicare: Improving Access for Patients with Alopecia. *The Journal of clinical and aesthetic dermatology*, 16(6), 52. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10286881/>



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7. Montgomery, K., White, C., & Thompson, A. (2017). A mixed methods survey of social anxiety, anxiety, depression and wig use in alopecia. *BMJ open*, 7(4), e015468. <https://doi.org/10.1136/bmjopen-2016-015468>
8. Rajoo, Y., Wong, J., Cooper, G., Raj, I. S., Castle, D. J., Chong, A. H., Green, J., & Kennedy, G. A. (2019). The relationship between physical activity levels and symptoms of depression, anxiety and stress in individuals with alopecia Areata. *BMC psychology*, 7(1), 48. <https://doi.org/10.1186/s40359-019-0324-x>

Approval History

Effective June 01, 2016, state filing is no longer required per Maryland House Bill [HB 798](#) – Health Insurance – Reporting

Date approved by RUMC	Date of Implementation
12/21/2023	12/21/2023

*The Regional Utilization Management Committee received delegated authority in 2011 to review and approve designated Utilization Management and Medical Coverage Policies by the Regional Quality Improvement Committee.

Note: Kaiser Permanente Mid-Atlantic States (KPMAS) include referral and authorization criteria to support primary care and specialty care practitioners, as appropriate, in caring for members with selected conditions. Medical Coverage Policies are not intended or designed as a substitute for the reasonable exercise of independent clinical judgment by a practitioner in any particular set of circumstances for an individual member.