

Important information you may need when pursuing payment with your insurance company for a wig

1. A wig is also known as a Cranial Prosthesis.
2. Verify wig coverage by contacting your insurance carrier by telephone, the website or reading your policy. There should be a section under “covered expenses” related to prosthesis, prosthetic devices or medical durable equipment with your policy.
3. Ask your physician to write a prescription for a full cranial prosthesis, NOT a wig. You will need to submit this prescription with the claim.
4. Obtain a claim form from your insurance provider. Make sure to include the prescription and invoice when submitting payment. Many claim forms are usually available on the insurance website.
 - a. Often you will need a diagnosis code for your cancer (i.e., Breast Cancer: 174.9)
 - b. For other diagnosis codes, please ask your physician.
 - c. A Procedure Code (CPT Code) may be helpful when confirming reimbursement with your insurance carrier. The CPT Code for a cranial prosthesis is A9282.
5. Keep copies of all receipts and invoices for your cranial prosthesis. The portion that is not covered by your insurance may be tax deductible.
6. If your insurance coverage is denied, you can appeal it by:
 - a. Ask for an evaluation by a medical review board. Include the original claim.
 - b. Ask for a written reply as to why the claim was denied.
 - c. Send a letter to the claims department supervisor.

NOTE: The above is for your reference only. Follow the procedures in your individual policy.

REFUNDS: Wig purchases are non-refundable. However, prior to customizing your wig, it can be exchanged for an equal or more expensive piece.