



Health & Human Services

EXTERNAL BREAST PROSTHESIS

Service Authorization: No

CMN: No

DURABLE MEDICAL EQUIPMENT MANUAL

COVERAGE AND LIMITATION CRITERIA AND POLICY

EFFECTIVE: March 2007

REVISED: November 2023

EXTERNAL BREAST PROSTHESIS

Indications and limitations of coverage and medical appropriateness:

- Mastectomy patient.
- Allow 4 prosthetic bras per year.
- Prosthetics can be replaced every 2 years for silicone and every 6 months for fabric, foam, or fiber.
- Allow one per side.
- Replacement of prosthesis allowed if irreparable damage.

Documentation Requirements:

- The right and/or left modifier must be used when requesting.
- The addition of the appropriate repair and/or replacement is required.
- A prescription from prescribing physician/practitioner.
- Medical documentation supporting the need.
- Physician/practitioner exam per current DME Manual's requirements.

Date Revised

Revisions



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February 2017

Reformatted and reviewed

November 2019

Reviewed. Documentation requirements section bullet three "Reference the DME Manual and the General Information Provider Manual for required documents for the member's file needed for post pay audit purposes" deleted.

Added:

- A prescription from prescribing physician/practitioner.
- Medical documentation supporting the need.
- Physician/practitioner exam per current DME Manual's requirements.

November 23, 2022

Reviewed and reformatted. Header logo updated with new logo.

November 29, 2023

Reviewed and reformatted. No changes made.