Medical Insurance Coverage Instructions

Health insurance companies vary with their willingness to cover or contribute toward a medically necessary wig. It is wise to contact them before coming to the salon to make your selection, as their policy could affect your wig choice. Regardless of coverage, your wig is purchased first and then the receipt is submitted by you to your health insurance company.

Step 1: Become informed on your insurance policy and contract

- Request your full insurance contract from your carrier or plan administrator.
 Make note of the "exclusions" section, and pay special attention to prosthesis coverage.
 Because so many policies do not indicate exclusions in the prosthesis section, you can often get coverage for your wig as long as you refer to it as a "cranial prosthesis.
- You can also call your insurance company and ask a customer service representative if your plan covers the cost of a "cranial prosthesis"

Step 2: File an initial claim with your insurance company.

- Find out what forms are necessary to submit as part of your claim.
- Include a prescription from your physician for cranial prosthesis (make sure it does NOT say "wig" or your claim could be rejected).
- Include a receipt for the prosthesis from Alternative Hair (it will say "cranial prosthesis"), and if required have your stylist sign off on your claim form (usually not required). Your receipt will have information they require the salon Tax ID, National Provider ID and Procedure Code. You will probably also need to obtain the Diagnosis Code from your physician.

Step 3: If your initial claim is rejected submit an appeal.

- Do not take this rejection as a sign that they are right and you are wrong.
- Write a letter requesting a review by the medical review board of your insurance company, and request a written reply. Include a copy of your original claim and a photo of yourself without the cranial prosthesis. We have seen this be successful.
- Send your letter to a supervisor in the claims department. That way, your claim will most likely be reviewed by a new person.

A final word about the claims process:

There's no question that this process can be frustrating at times: however, try not to let it upset you. Insurance companies are huge bureaucratic machines, processing thousands of claims each day just like yours. Anticipate delays as far as paperwork is concerned.

Sometimes you'll receive a rejection before one of your appeals has been processed. Do not take any of it personally. Be the squeaky wheel, remain persistent, and keep an accurate log of all transactions.