

EXTERNAL BREAST PROSTHESIS

Service Authorization: No

DURABLE MEDICAL EQUIPMENT MANUAL

COVERAGE AND LIMITATION CRITERIA AND POLICY

EFFECTIVE: March 2007

REVISED: December 2025

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 the prosthesis is allowed if irreparable damage occurs.

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



Health & Human Services

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Date Revised	Revisions
February 2017	Reformatted and reviewed
November 2019	<p>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.</p> <p>Added:</p> <ul style="list-style-type: none"> • A prescription from a prescribing physician/practitioner. • Medical documentation supporting the need. • Physician/practitioner exam per the 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.
December 17, 2025	Reviewed and reformatted. Removed “CMN” verbiage from the header section.