



MO HealthNet PA Criteria V 1.3

Medical Procedure Class:	Mastectomy Bra, L8000
Implementation Date:	6/30/2009
Prepared for:	MO HealthNet

New Criteria

Revision of Existing Criteria

Executive Summary

Purpose:	To allow a more consistent and streamlined authorization process for mastectomy bras.	
Why was this Issue Selected:	Senate Bill 577 passed by the 94 th General Assembly directs MO HealthNet to utilize an electronic web-based system to authorize Durable Medical Equipment using best medical evidence and care and treatment guidelines, consistent with national standards to verify medical need.	
Procedures subject to Pre-Certification	L8000, breast prosthesis, mastectomy bra	
Setting & Population:	All MO HealthNet fee-for-service participants	
Data Sources:	<input checked="" type="checkbox"/> Medicare LCD	<input checked="" type="checkbox"/> MHN Policy

Setting & Population

All MO HealthNet fee for service participants.

Approval Criteria

A mastectomy bra is covered for a patient who has had a mastectomy, ICD-9-CM diagnosis code V45.71, 174.0 - 174.9, or 233.0.

Denial Criteria

The approval criteria are not met.

Quantity Limitation

L8000 is limited to 3 per 12 months.

Approval Period

90 days

Appendix A: Potential Questions for Step 1 and Step 2

****The following questions may be encountered as part of the approval and denial criteria. Depending on the patient's history and the way previous questions may be answered, not every question may be asked for every patient.**

1. Is there a written signed and dated physician's order for a mastectomy bra(s)?