



FEBRUARY 2021

KMAP GENERAL BULLETIN 21009

## Pediatric Cranial Remolding Helmets

Effective with dates of service on and after March 1, 2021, Healthcare Common Procedure Coding System (HCPCS) code S1040 for cranial remolding orthosis will be covered for children ages 3-18 months of age with the diagnosis of plagiocephaly, with or without torticollis (diagnosis codes Q67.3, Q75.0 and M43.6). Documentation of a trial of conservative therapy of at least two months duration with cranial repositioning must be completed before a cranial remolding orthosis therapy is initiated.

Children post-operatively from craniosynostosis surgery may require a cranial remolding orthosis. A cranial remolding orthosis can help to resolve the asymmetry of the skull more quickly than just repositioning. Measuring and fitting for a cranial remolding orthosis, including follow up measuring and refitting of a new cranial remolding orthosis due to growth of child will be covered.

Provider Types/Specialties	Description
31/345	General Pediatrician
31/325	Neurological Surgeon
31/334	Pediatric Surgeon can assess and diagnose the need for a cranial remolding orthosis
25/277	DME-prosthesis

Reimbursement for S1040 will be \$3,000.00.

**Note:** The effective date of the policy is March 1, 2021. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Open Claims Resolution Log on the KMAP Bulletins page documents the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.

**KMAP**

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

**Customer Service**

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.  
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