
CHAPTER 18: DURABLE MEDICAL EQUIPMENT

SECTION 18.2: SPECIFIC COVERAGE CRITERIA**PAGE(S) 1**

18.2.13 Binders and Supports**18.2.13.1 Abdominal Binder and Hernia Supports****Abdominal Binders**

Abdominal binders may be approved with documentation of medical necessity.

Hernia Supports

Hernia supports may be approved with documentation of medical necessity.

18.2.13.2 Lumbar Orthosis and Truss Supports

Lumbar orthosis and truss supports may be approved with documentation of medical necessity.