

**Criteria Checklist**  
**Alabama Medicaid Agency**  
**Cranial Orthoses**

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**Policy effective July 19, 2023**

**PREREQUISITE CRITERIA** *All of the following **must** be met with supporting documentation\*:*

- Patient is Medicaid eligible.
- Patient has current EPSDT screening.
- Prescription should indicate which type of cranial orthosis and the medical reason for its use.
- Medical documentation of cranial vault remodeling surgery

**PROCEDURE CODES**

S1040

Cranial orthotic helmets are limited to two (2) per lifetime.

*\*Documentation may include notes from the patient chart.*