

Premier Health Plan

POLICY AND PROCEDURE MANUAL

Policy Number: MP.011.PH
Last Review Date: 02/08/2018
Effective Date: 04/01/2018

MP.011.PH – Surgical Dressings and Wound Care Supplies

This policy applies to the following lines of business:

- ✓ Premier Employee

Premier Health Plan considers **Surgical Dressings and Wound Care Supplies** medically necessary for the following indications:

GENERAL GUIDELINES

- Surgical or wound care dressings are used for wound debridement or the treatment of a wound caused by, or treated by, a surgical procedure,
- Dressing supplies are ordered by the treating physician and provided by a home care agency or a surgical supply vendor,
- Medical necessity is documented in the member's medical record to support dressing changes if they are more frequent than recommended in the guidelines listed in this policy.

NOTE: An order for each item billed must be signed and dated by the treating physician, kept on file by the supplier, and made available.

SPECIFIC GUIDELINES

- Alginate or other Fiber Gelling Dressing** – Covered (A6196-A6199)
 - Moderately to highly exudative full thickness wounds (e.g., stage III or IV ulcers); and alginate or other fiber gelling dressing fillers for moderately to highly exudative full thickness wound cavities (e.g., stage III or IV ulcers) to maintain a moist environment on the wound base (i.e. Aquacel, Algisite, Silvercel, Nu-Derm Aliginate);
 - One wound cover sheet of the approximate size of the wound or up to two units of wound filler (one unit = six inches of alginate or other fiber gelling dressing rope) is usually used at each dressing change;
 - Usual dressing change is up to once per day.
- Collagen-Based Dressings** – Covered (A6010-A6011, A6021-A6024)
 - Collagen dressings are high in absorptive capabilities. They provide strength, elasticity, and structure to tissue (i.e. Cellerate Gel, Puracol, Biostep, Fibracol, Prisma, Promogran).
- Composite Dressing** – Covered (A6203-A6204)

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH

Last Review Date: 02/08/2018

Effective Date: 04/01/2018

- A single dressing that provides multiple functions. As a bacterial barrier, an absorptive layer other than an alginate, foam, hydrocolloid, or hydrogel, as either a semi-adherent or non-adherent property over the wound site, and an adhesive border (i.e. Covaderm Plus, Mepore Pro, Opsite Post-op, Stratasob).
- Up to three composite dressing changes per week are considered medically necessary, one wound cover per dressing change and usual composite dressing change is up to three times per week.

d) **Compression Burn Garments** -- Covered (A6501-A6513)

- Used to reduce hypertrophic scarring and joint contractures following a burn injury.

e) **Contact Layers** -- Covered (A6206-A6208)

- Dressings which are porous thin non-adherent sheets placed directly on an open wound or to line a wound
- Placed directly on an open wound bed to protect the wound tissue from direct contact with other agents
- Usual dressing change is up to once per week.

f) **Dressing over a Percutaneous Catheter or Tube** -- Covered

- As long as the catheter or tube remains in place and after removal until the wound heals.

g) **Foam Dressing** – Covered (A6029-A6215)

- A sterile, non-linting, absorptive non-adherent dressing
- Used on full thickness wounds (e.g., stage III or IV ulcers) with moderate to heavy exudate (i.e. Tegaderm, Polymem, Lyfoam, Mepi Lex, Allevyn, Tielle).
- When used as a primary or secondary dressing, the usual dressing change is up to three times per week.
- Usual dressing change for foam wound fillers is up to one per day.

h) **Gauze-- Impregnated with Water or Normal Saline**

(Refer to Limitations section)

i) **Gauze-- Impregnated with other than Water or Normal Saline** – Covered (A6222-A6224), A6231-A6233, A6266, A6456)

- Up to one dressing change per day for gauze dressings impregnated with other than water or normal saline (i.e. Kerlix AMD, Telfa AMD, Petrolatum gauze, Xeroform).

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
Last Review Date: 02/08/2018
Effective Date: 04/01/2018

- j) **Gauze- Non-Impregnated** – Covered (A6216-A6221, A6402-A6404, A6407, A6457)
- For a dressing without a border- up to three dressing changes per day are covered.
 - For a dressing with a border- one dressing change per day is covered

Note: It is usually not considered medically necessary to stack more than two gauze pads on top of each other in any one area.

- k) **Gradient Compression Garments/ Stockings** -- Covered
- Non-elastic gradient compression wrap is limited to one every six months
- (Refer to MP .015 Gradient Compression Garments and Stockings policy)*

- l) **Hydrocolloid Dressing** -- Covered (A6234-A6241)
- Used on wounds with light to moderate exudate to provide a moist healing environment and help to stimulate and protect any newly formed tissue (i.e. Tegaderm, Comfeel, Flexicol, Combiderm, Duoderm, NuDerm Hydrocolloid).
 - Up to three dressing changes per week are covered for hydrocolloid wound covers or hydrocolloid wound fillers.

- m) **Hydrogel Dressing** – Covered (A6242-A6248)
- Used on full thickness wounds with minimal or no exudate (e.g., stage III or IV ulcers). They offer a “cooling” effect, act as a barrier, and provide a moist healing environment i.e. Avogel, Dermagel, NuGel).
 - The usual dressing change for hydrogel wound covers without adhesive border or hydrogel wound fillers is up to once per day.
 - The usual dressing change for hydrogel wound covers with adhesive border is up to three times per week.

- n) **Non Elastic Gradient Compression wrap** -- Covered (A6545)
- Used in the treatment of open venous stasis ulcer.

- o) **Other (Light Compression bandage, moderate/high compression bandage, self-adherent bandage, conforming bandage, padded bandage, eye pad, surgical dressing holder, misc.)** A4461, A4463, A4649, A6410-A6412, A6441-A6455)

1. Light compression, self-adherent bandage and conforming bandages - Covered
- They are used to hold wound cover dressings in place over any wound type
 - The usual frequency of changing these bandages is once per week unless they are part of a multi-layer compression bandage system.

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
Last Review Date: 02/08/2018
Effective Date: 04/01/2018

2. Moderate/high compression bandages, conforming bandages, self-adherent bandages and padded bandages - Covered
 - They are part of a multi-layer compression bandage system used in the treatment of venous stasis ulcer.
 - The usual frequency of these bandages is once per week unless they are part of a multi-layer compression bandage system.
 3. Conforming bandage dressing
 - The dressing change is determined by the frequency of change of the underlying dressing.
- p) **Silver Dressings** - refer to the indications for other components of the dressing (e.g., foam, non-impregnated gauze dressing etc.)
- q) **Specialty Absorptive Dressing** -- Covered (A6251-A6256)
 - Unitized as multi-layer dressings which provide either a semi-adherent quality or non-adherent layer, and are made of highly absorptive layers of fibers such as absorbent cellulose, cotton, or rayon, with/without adhesive border
 - Used for moderately or highly exudative wounds (e.g., stage III or IV ulcers).
 - Up to one dressing change of specialty absorptive dressing per day is covered for a dressing without an adhesive border.
 - Up to one dressing change every other day for a dressing with an adhesive border
- r) **Surgical Dressings** -- Covered
- s) **Surgical Dressings used in conjunction with Investigational Wound Healing (e.g., platelet derived wound healing formula)** - Covered
 - When all applicable coverage criteria are met based on the number and type of surgical dressings that are appropriate to treat the wound if the investigational therapy were not being used.
- t) **Tape** -- Covered (A4450, A4452)
 - Used to hold on a wound cover, elastic roll gauze or non-elastic roll gauze.
 - The usual use for wound covers measuring 16 square inches or less is up to two units per dressing change;
 - The usual use for wound covers measuring 16 to 48 square inches is up to three units per dressing change;

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
Last Review Date: 02/08/2018
Effective Date: 04/01/2018

- The usual use for wound covers measuring greater than 48 square inches, up to four units per dressing change.
Additional tape is usually not required when a wound cover with an adhesive border is used. The medical necessity for tape in these situations would need to be documented.
- The medically necessary frequency of tape change is determined by the frequency of change of the wound cover.

u) **Transparent Film Dressings – Covered (A6257-A6259)**

- Used on open partial thickness wounds with minimal exudate or closed wounds (i.e. Tegaderm, Polyskin, Opsite Flexigrid).
- Usual dressing change is up to three times per week.

v) **Wound Cover with/without Adhesive Border on all sides – Covered**

- Flat dressing pads. An adhesive border is usually more binding than that obtained with separate taping and is therefore indicated for use with wounds requiring less frequent dressing changes. When these are being used, no other dressing is needed on top of it.
- Reasons for use of additional tape must be well documented.

w) **Wound Filler/Dressing – Covered (A6261, A6262)**

- Dressing materials which are placed into open wounds to eliminate dead space, absorb exudate, or maintain a moist wound surface. They come in hydrated forms (i.e. gels, pastes, etc.), dry forms (i.e. granules, powder, beads, etc.) and other forms (i.e. rope, spirals, pillows etc.)

Examples: Alginate, or other Fiber Gels, Foam, Hydrocolloid, Hydrogel and Non-impregnated packing strips.

The units of service for wound fillers are one gram, one fluid ounce, six inch length, or one yard depending on the product. If the individual product is packaged as a fraction of a unit (e.g., 1/2 fluid ounce), determine the units billed by multiplying the number dispensed times the individual product size and rounding to the nearest whole number. For example, if eleven (11) 1/2 oz. tubes of a wound filler are dispensed, bill six units ($11 \times 1/2 = 5.5$; round to 6).

- The usual dressing change is up to one time per day.
- The quantity of hydrogel filler used for each wound must not exceed the amount needed to line the surface of the wound. Additional amounts used to fill a cavity are not medically necessary.

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
Last Review Date: 02/08/2018
Effective Date: 04/01/2018

- Documentation must substantiate the medical necessity for hydrogel filler used in excess of three fluid ounces per wound in thirty days.

x) Wound Pouch – Covered (A6154)

- A wound pouch is a waterproof collection device with a drainable port that adheres to the skin around a wound.
- The usual dressing change is up to three times per week.

Limitations

1. Dressing supplies are not covered when they do not require a prescription and can be purchased by the member over-the-counter or when they are given to the patient as take-home supplies.
2. No more than a one month's supply of dressings is considered medically necessary at one time.
3. When a physician applies surgical dressings as part of their service, the surgical dressings are considered incidental to the professional services of the health care practitioner and are not separately payable.
4. Not covered under the surgical dressings benefit:
 - Antibiotic Impregnated Dressing- it is considered a drug
 - Enzymatic Debriding Agents
 - First-aid type adhesive bandage (a wound cover with pad size less than four inches) - it does not meet the definition of a surgical dressing.
 - Gauze or other Dressings used to cleanse or debride a wound but not left in a wound
 - Skin sealants or Barriers (A6250)
 - Small adhesive bandages (Band-Aids etc.) - they are not primarily used for the treatment of wounds.
 - Silicone Gel Sheet used for the treatment of keloids or other scars – (A6025) it does not meet the definition of a surgical dressing.
 - Topical Antiseptics
 - Topical Antibiotics
 - Wound Cleansers or Irrigating Solutions used to moisten gauze (e.g, saline)
 - When dressings are covered under other benefits, payment for the dressing is included in the allowance for the other code, for example, dressings used with the following:
 - Infusion pumps
 - Ventricular Assist Device (VAD)
 - Parenteral nutrition
 - Gastrostomy tubes
 - Tracheostomies
 - Dialysis Catheter

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
Last Review Date: 02/08/2018
Effective Date: 04/01/2018

- Non-Elastic Binder
5. The following are situations in which dressings/wound care supplies are considered not medically necessary:
- Drainage from a cutaneous fistula which has not been caused by or treated by a surgical procedure
 - A stage I pressure ulcer
 - A first degree burn
 - Wounds caused by trauma which do not require surgical closure or debridement (e.g., skin tear or abrasion)
 - A venipuncture or arterial puncture site (e.g., blood sample) other than the site of an indwelling catheter or needle.
6. Specific Dressings and Wound Care Products that are not medically necessary:
- Alginate or other fiber gelling dressing covers for dry wounds or wounds covered with eschar. It is usually inappropriate to use alginates in combination with hydrogels.
 - Elastic stockings, support hose, foot coverings, leotards, knee supports, and surgical leggings, are examples of items that are not ordinarily covered as surgical dressings.
 - Elastic bandages when used for strains, sprains, edema, or situations other than as a secondary surgical dressing.
 - Hydrogel dressings used for stage II ulcers. Documentation must substantiate the medical necessity for use of hydrogel dressings for stage II ulcers (e.g., location of ulcer is sacro-coccygeal area).
Use of both hydrogel filler and hydrogel cover on the same wound at the same time is not medically necessary.
 - Gauze Impregnated with Water or Normal Saline – (A6628-A6230) There is no medical necessity for these dressings compared to non-impregnated gauze which is moistened with bulk saline or sterile water, and therefore not covered.

See Also:

MP.015.PH - Compression Garments and Stockings

PA.010.PH - Durable Medical Equipment, Corrective Appliances and Other Devices;
Repair/Replacement

Background

Surgical dressings referred to in this policy are intended for the use of wound debridement, or the treatment of a wound caused or treated by a surgical procedure. Wound care involves the evaluation and treatment of a wound, including identifying potential causes of delayed wound healing and the modification of treatment when indicated.

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
Last Review Date: 02/08/2018
Effective Date: 04/01/2018

The Centers for Medicare and Medicaid Services (CMS) states that the quantity and type of dressings dispensed at any one time must take into account the current status of the wound(s), the likelihood of change, and the recent use of dressings. Dressing needs may change frequently (e.g., weekly) in the early phases of wound treatment and/or with heavily draining wounds. Suppliers are also expected to have a mechanism for determining the quantity of dressings that the patient is actually using and to adjust their provision of dressings accordingly. Additionally, surgical dressings must be tailored to the specific needs of an individual patient.

Typically the goal of wound management is that wound care will eventually be able to be performed by the patient (or patient's caregiver) with supplemental physician assessment and supervision.

CPT Codes / HCPCS Codes / ICD-10 Codes	
Covered Codes	Description
A4450	Tape, non-waterproof, per 18 square inches
A4452	Tape, waterproof, per 18 square inches
A4461	Surgical dressing holder, non-reusable, each
A4463	Surgical dressing holder, reusable, each
A4649	Surgical supply; miscellaneous
A6010	Collagen based wound filler, dry form, sterile, per gram of collagen
A6011	Collagen based wound filler, gel/paste, per gram of collagen
A6021	Collagen dressing, pad size 16 sq. in. or less, each
A6022	Collagen dressing, pad size more than 16 sq. in. but less than or equal to 48 sq. in., each
A6023	Collagen dressing, pad size more than 48 sq. in., each
A6024	Collagen dressing wound filler, sterile, per 6 inches
A6154	Wound pouch, each
A6196	Alginate or other fiber gelling dressing, wound cover, sterile, pad size 16 sq. in. or less, each dressing
A6197	Alginate or other fiber gelling dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., each dressing
A6198	Alginate or other fiber gelling dressing, wound cover, sterile, pad size more than 48 sq. in., each dressing

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
 Last Review Date: 02/08/2018
 Effective Date: 04/01/2018

A6199	Alginate or other fiber gelling dressing, wound filler, sterile, per 6 inches
A6203	Composite dressing, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing
A6204	Composite dressing, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing
A6205	Composite dressing, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing
A6206	Contact layer, sterile, 16 sq. in. or less, each dressing
A6207	Contact layer, sterile, more than 16 sq. in. but less than or equal to 48 sq. in., each dressing
A6208	Contact layer, sterile, more than 48 sq. in., each dressing
A6209	Foam dressing, wound cover, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing
A6210	Foam dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing
A6211	Foam dressing, wound cover, sterile, pad size more than 48 sq. in., without adhesive border, each dressing
A6212	Foam dressing, wound cover, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing
A6213	Foam dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing
A6214	Foam dressing, wound cover, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing
A6215	Foam dressing, wound filler, sterile, per gram
A6216	Gauze, non-impregnated, non-sterile, pad size 16 sq. in. or less, without adhesive border, each dressing
A6217	Gauze, non-impregnated, non-sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing
A6218	Gauze, non-impregnated, non-sterile, pad size more than 48 sq. in., without adhesive border, each dressing
A6219	Gauze, non-impregnated, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing
A6220	Gauze, non-impregnated, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
 Last Review Date: 02/08/2018
 Effective Date: 04/01/2018

A6221	Gauze, non-impregnated, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing
A6222	Gauze, impregnated with other than water, normal saline, or hydrogel, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing
A6223	Gauze, impregnated with other than water, normal saline, or hydrogel, sterile, pad size more than 16 square inches, but less than or equal to 48 square inches, without adhesive border, each dressing
A6224	Gauze, impregnated with other than water, normal saline, or hydrogel, sterile, pad size more than 48 square inches, without adhesive border, each dressing
A6231	Gauze, impregnated, hydrogel, for direct wound contact, sterile, pad size 16 sq. in. or less, each dressing
A6232	Gauze, impregnated, hydrogel, for direct wound contact, sterile, pad size greater than 16 sq. in., but less than or equal to 48 sq. in., each dressing
A6233	Gauze, impregnated, hydrogel for direct wound contact, sterile, pad size more than 48 sq. in., each dressing
A6234	Hydrocolloid dressing, wound cover, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing
A6235	Hydrocolloid dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing
A6236	Hydrocolloid dressing, wound cover, sterile, pad size more than 48 sq. in., without adhesive border, each dressing
A6237	Hydrocolloid dressing, wound cover, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing
A6238	Hydrocolloid dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing
A6239	Hydrocolloid dressing, wound cover, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing
A6240	Hydrocolloid dressing, wound filler, paste, sterile, per fluid ounce
A6241	Hydrocolloid dressing, wound filler, dry form, sterile, per gram
A6242	Hydrogel dressing, wound cover, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing
A6243	Hydrogel dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing
A6244	Hydrogel dressing, wound cover, sterile, pad size more than 48 sq. in., without adhesive border, each dressing

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
 Last Review Date: 02/08/2018
 Effective Date: 04/01/2018

A6245	Hydrogel dressing, wound cover, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing
A6246	Hydrogel dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing
A6247	Hydrogel dressing, wound cover, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing
A6248	Hydrogel dressing, wound filler, gel, per fluid ounce
A6251	Specialty absorptive dressing, wound cover, pad size 16 sq. in. or less, without adhesive border, each dressing
A6252	Specialty absorptive dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing
A6253	Specialty absorptive dressing, wound cover, sterile, pad size more than 48 sq. in., without adhesive border, each dressing
A6254	Specialty absorptive dressing, wound cover, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing
A6255	Specialty absorptive dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing
A6256	Specialty absorptive dressing, wound cover, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing
A6257	Transparent film, sterile, 16 sq. in. or less, each dressing
A6258	Transparent film, more than 16 sq. in. but less than or equal to 48 sq. in., each dressing
A6259	Transparent film, sterile, more than 48 sq. in., each dressing
A6261	Wound filler, gel/paste, per fluid ounce, not elsewhere classified
A6262	Wound filler, dry form, per gram, not elsewhere classified
A6266	Gauze, impregnated, other than water, normal saline, or zinc paste, sterile, any width, per linear yard
A6402	Gauze, non-impregnated, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing
A6403	Gauze, non-impregnated, sterile, pad size more than 16 sq. in., less than or equal to 48 sq. in., without adhesive border, each dressing

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
 Last Review Date: 02/08/2018
 Effective Date: 04/01/2018

A6404	Gauze, non-impregnated, sterile, pad size more than 48 sq. in., without adhesive border, each dressing
A6407	Packing strips, non-impregnated, sterile, up to 2 inches in width, per linear yard
A6410	Eye pad, sterile, each
A6411	Eye pad, non-sterile, each
A6412	Eye patch, occlusive, each
A6413	Adhesive bandage, first-aid type, any size, each
A6441	Padding bandage, non-elastic, non-woven/non-knitted, width greater than or equal to three inches and less than five inches, per yard
A6442	Conforming bandage, non-elastic, knitted/woven, non-sterile, width less than three inches, per yard
A6443	Conforming bandage, non-elastic, knitted/woven, non-sterile, width greater than or equal to three inches and less than five inches, per yard
A6444	Conforming bandage, non-elastic, knitted/woven, non-sterile, width greater than or equal to 5 inches, per yard
A6445	Conforming bandage, non-elastic, knitted/woven, sterile, width less than three inches, per yard
A6446	Conforming bandage, non-elastic, knitted/woven, sterile, width greater than or equal to three inches and less than five inches, per yard
A6447	Conforming bandage, non-elastic, knitted/woven, sterile, width greater than or equal to five inches, per yard
A6448	Light compression bandage, elastic, knitted/woven, width less than three inches, per yard
A6449	Light compression bandage, elastic, knitted/woven, width greater than or equal to three inches and less than five inches, per yard
A6450	Light compression bandage, elastic, knitted/woven, width greater than or equal to five inches, per yard
A6451	Moderate compression bandage, elastic, knitted/woven, load resistance of 1.25 to 1.34 foot pounds at 50% maximum stretch, width greater than or equal to three inches and less than five inches, per yard
A6452	High compression bandage, elastic, knitted/woven, load resistance greater than or equal to 1.35 foot pounds at 50% maximum stretch, width greater than or equal to three inches and less than five inches, per yard

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
 Last Review Date: 02/08/2018
 Effective Date: 04/01/2018

A6453	Self-adherent bandage, elastic, non-knitted/non-woven, width less than three inches, per yard
A6454	Self-adherent bandage, elastic, non-knitted/non-woven, width greater than or equal to three inches and less than five inches, per yard
A6455	Self-adherent bandage, elastic, non-knitted/non-woven, width greater than or equal to five inches, per yard
A6456	Zinc paste impregnated bandage, non-elastic, knitted/woven, width greater than or equal to three inches and less than five inches, per yard
A6457	Tubular dressing with or without elastic, any width, per linear yard
A6501	Compression burn garment, bodysuit (head to foot), custom fabricated
A6502	Compression burn garment, chin strap, custom fabricated
A6503	Compression burn garment, facial hood, custom fabricated
A6504	Compression burn garment, glove to wrist, custom fabricated
A6505	Compression burn garment, glove to elbow, custom fabricated
A6506	Compression burn garment, glove to axilla, custom fabricated
A6507	Compression burn garment, foot to knee length, custom fabricated
A6508	Compression burn garment, foot to thigh length, custom fabricated
A6509	Compression burn garment, upper trunk to waist including arm openings (vest) custom fabricated
A6510	Compression burn garment, trunk, including arms down to leg openings (leotard) custom fabricated
A6511	Compression burn garment, lower trunk including leg openings (panty), custom fabricated
A6512	Compression burn garment, not otherwise classified
A6513	Compression burn mask, face and/or neck, plastic or equal, custom fabricated
A6545	Gradient compression wrap, non-elastic, below-knee, 30-50 mm hg, each
Not Covered Codes and Description	
A6025	Gel sheet for dermal or epidermal application, (e.g., silicone, hydrogel, other), each
A6228	Gauze, impregnated, water or normal saline, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH
Last Review Date: 02/08/2018
Effective Date: 04/01/2018

A6229	Gauze, impregnated, water or normal saline, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing
A6230	Gauze, impregnated, water or normal saline, sterile, pad size more than 48 sq. in., without adhesive border, each dressing
A6250	Skin sealants, protectants, moisturizers, ointments, any type, any size
A6260	Wound cleansers, any type, any size

References

1. Centers for Medicare and Medicaid Services (CMS). Local Coverage Determination (LCD) No: L33831 - Surgical Dressings. (Contractor: CGS Administrators, LLC) Revision Effective Date: 07/01/2016
<https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=33831&ver=6&Date=&DocID=L33831+&bc=iAAAABAAAAAAA%3d%3d&>
2. Centers for Medicare and Medicaid Services (CMS). Local Coverage Determination (LCD) No: L34587 – Wound Care. (Contractor: Wisconsin Physicians Service Insurance Corporation) Revision Effective Date: 11/01/2017.
<https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=34587&ver=26&Date=&DocID=L34587+&bc=iAAAABAAAAAA&>
3. Centers for Medicare and Medicaid Services (CMS). Local Coverage Article: No. A53001 - Wound Care. Article Revision Effective Date: 11/09/2017.
<https://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=53001&ver=17&Date=&DocID=A53001+&bc=hAAAABAAAA&>
4. Heenan A. World Wide Wounds: Dressings on the Drug Tariff,. Last modified 29 March 2001. ©1992- 2001, SMTL.
<http://www.worldwidewounds.com/1997/july/Heenan/Tariff.html#AbsAdh>
5. Rivera AE, Spencer JM. Clinical aspects of full-thickness wound healing. Clin Dermatol. 2007 Jan-Feb; 25(1): 39-48.
<http://www.ncbi.nlm.nih.gov/pubmed/17276200>
6. World Union of Wound Healing Societies (WUWHS). Principles of best practice: Wound exudate and the role of dressings. A consensus document. London: MEP, Ltd., 2007. Available at:
http://www.woundsinternational.com/pdf/content_42.pdf

Disclaimer:

MP.011.PH – Surgical Dressings and Wound Care Supplies

Policy Number: MP.011.PH

Last Review Date: 02/08/2018

Effective Date: 04/01/2018

Premier Health Plan medical payment and prior authorization policies do not constitute medical advice and are not intended to govern or otherwise influence the practice of medicine. The policies constitute only the reimbursement and coverage guidelines of Premier Health Plan and its affiliated managed care entities. Coverage for services varies for individual members in accordance with the terms and conditions of applicable Certificates of Coverage, Summary Plan Descriptions, or contracts with governing regulatory agencies.

Premier Health Plan reserves the right to review and update the medical payment and prior authorization guidelines in its sole discretion. Notice of such changes, if necessary, shall be provided in accordance with the terms and conditions of provider agreements and any applicable laws or regulations.

These policies are the proprietary information of Evolent Health. Any sale, copying, or dissemination of said policies is prohibited.