

Wound Care Supplies

Plan: AmeriHealth Caritas Louisiana

Clinical Policy ID: CCP.4034

Recent review date: 3/2024

Next review date: 7/2025

Policy contains: Wound care; wound care system; wound dehiscence.

AmeriHealth Caritas Louisiana has developed clinical policies to assist with making coverage determinations. AmeriHealth Caritas Louisiana's clinical policies are based on guidelines from established industry sources, such as the Centers for Medicare & Medicaid Services (CMS), state regulatory agencies, the American Medical Association (AMA), medical specialty professional societies, and peer-reviewed professional literature. These clinical policies along with other sources, such as plan benefits and state and federal laws and regulatory requirements, including any state- or plan-specific definition of "medically necessary," and the specific facts of the particular situation are considered, on a case-by-case basis by AmeriHealth Caritas Louisiana when making coverage determinations. In the event of conflict between this clinical policy and plan benefits and/or state or federal laws and/or regulatory requirements, the plan benefits and/or state and federal laws and/or regulatory requirements shall control. AmeriHealth Caritas Louisiana's clinical policies are for informational purposes only and not intended as medical advice or to direct treatment. Physicians and other health care providers are solely responsible for the treatment decisions for their patients. AmeriHealth Caritas Louisiana's clinical policies are reflective of evidence-based medicine at the time of review. As medical science evolves, AmeriHealth Caritas Louisiana will update its clinical policies as necessary. AmeriHealth Caritas Louisiana's clinical policies are not guarantees of payment.

Policy statement

Wound Care Supplies

Surgical dressings, bandages, and other wound care supplies may receive prior authorization (PA) approval for three months at a time. The PA request must reflect the submitted prescription. The PA request must document the factors below in order to meet criteria.

To request PA for wound care supplies, the following documentation must be provided:

- Accurate diagnostic information pertaining to the underlying diagnosis/condition as well as any other medical diagnoses/conditions, to include the member's overall health status;
- Appropriate medical history related to the current wound;
- Wound measurements to include length, width and depth, any tunneling and/or undermining;
- Wound color, drainage (type and amount) and odor, if present;
- The prescribed wound care regimen, to include frequency, duration and supplies needed;
- Treatment for infection, if present;
- The member's use of a pressure reducing mattress and/or cushion, when appropriate; and
- Whether or not a home health agency is involved in the care.

The prescription must be updated for any extensions to be granted.
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An AmeriHealth Caritas Louisiana approved home health agency must be involved in the care of the member for consideration of approval for wound care supplies. Any routine supplies provided by the home health agency that are not covered under Durable Medical Equipment (DME) must be provided in the skilled nursing visit rate.

Wound Care Reimbursement

When prior authorized as medically necessary, reimbursement is manually priced. AmeriHealth Caritas Louisiana will determine the reimbursement for manually priced DME items based on 70% of the Medicare fee schedule or, or billed charges, whichever is the lesser amount. If an item is not available at 70% of the Medicare fee schedule amount, or 70% of the manufacturer's suggested retail price amount, the flat fee that will be utilized will be the lowest cost at which the item has been determined to be widely available by analyzing the usual and customary fees charged in the community.

Wound Care System

Wound care systems may be considered for reimbursement when prior authorized. A wound care system may be considered for reimbursement for member with a Stage III or IV chronic, nonhealing wound, such as a pressure, venous stasis, and diabetic ulcers, postsurgical wound dehiscence, non-adhering skin grafts, or surgical flaps required for covering such wounds.

Types of wound care systems include the following:

- Thermal wound care system; and
- Sealed suction wound care system.

Portable hyperbaric oxygen chambers that are placed directly over the wound and provide higher concentrations of oxygen to the damaged tissue are not covered.

NOTE: This list of covered services may not be all inclusive.

Surgical Dressings and Bandages

The below surgical dressings and bandages are approved only for wound dressing and postoperative care with documentation of medical necessity:

- Gauze
- Tape
- Sponges
- Cement; and
- Disposable gloves.

Burn Garments and Stockings

Burn garments and stockings are approved only for severe burns and major vascular problems.

References

Louisiana Department of Health. 2010. Durable Medical Equipment Provider Manual. Wound Care Supplies. Chapter 18, Section 18.2.27. Issued 02/28/23.

Policy updates

Initial review date: 3/2/2021

3/2023: Policy references updated.

3/2024: Policy references updated.