







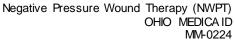
Negative Pressure Wound Therapy (NWPT)
OHIO MEDICA ID
MM-0224
Effective Date: 09/01/2020



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- C. Ulcers related to venous or arterial insufficiencies, that meet ALL of the following criteria:
 - 1. (In venous insufficiency) Compression garments/dressing/bandages are being applied consistently per physician orders in documented plan of care for at least thirty days.
 - 2. Ambulation and leg elevation have been ordered and documented ongoing compliance is in member medical record
- D. High-risk open fracture
- E. Wound that has either dehisced (separation of a previously closed surgical incision), has exposed bone or has exposed hardware
- F. Post sternotomy wound complication or infection (mediastinitis)
- G. Surgically created wound with complications resulting in a need for accelerated granulation therapy that cannot be achieved by other treatment modalities such as topical wound treatment
- H. Open non-healing amputation site in diabetic
- I. Delayed healing or non-healing of skin graft which is likely due to irregularly contoured or inadequate blood flood from the graft bed
- III. CareSource members may be eligible for the continuation of NPWT treatment for an additional 31 days when documentation by a licensed medical professional includes ALL of the following criteria:
 - A. Documentation that a licensed medical professional has directly performed the dressing change
 - B. Wound has progressive and measureable improvement.
 - Measurable improvement in wound healing is defined as measurable changes in the following: drainage; inflammation; swelling; pain and/or tenderness; wound dimensions (surface measurements (length times width), depth); granulation tissue; necrotic tissue/slough; or tunneling or undermining.
 - 2. If no measurable degree of improvement in wound healing has occurred from month to month, the approval for the NPWT will be discontinued.
 - Exception to measureable improvement is when a wound has been debrided within the last approval period, documentation of debridement must accompany the request for continuation of NPWT. Before and after images are preferred.
 - C. If abnormal, provisions have been made to the members nutritional status
 - D. Members underlying medical conditions are being monitored and controlled by





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- CareSource does not reimburse separately for NPWT when applied during surgery. The NPWT is covered under the surgery code. After the initial 31 day approval, the provider can request a continuation of NPWT.
- CareSource will only approve up to the following maximum allowances for supplies:
 - A. 15 dressing kits per wound, per 31 days
 - 1. Additional dressing kits may be authorized if the wound size requires more than 1 dressing kit for each dressing change
 - B. 10 canister sets per 31 days
 - 1. Additional canister sets may be approved if there is sufficient documentation

