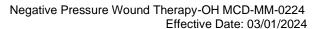
Medically necessary

Negative Pressure Wound Therapy-OH MCD-MM-0224 Effective Date: 03/01/2024

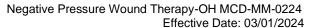
Negative Pressure Wound Therapy-OH MCD-MM-0224 Effective Date: 03/01/2024





- 1. A comprehensive diabetic management program has been implemented, including A1C management, medication management, and ongoing diabetic education.
- Foot care has been done by a medical professional that includes general inspection, nail care, reduction in pressure on foot ulcer, and monofilament testing.
- C. Ulcers related to venous or arterial insufficiencies, that meet the following criteria:
 - Compression garments/dressing/bandages are being applied consistently per physician orders in documented venous insufficiency plan of care for at least 30 days.
 - 2. Ambulation and leg elevation have been ordered and documented ongoing compliance is in the member medical record.
- D. Member has any of the following:
 - 1. high-risk open fracture
 - 2. dehisced wound
 - 3. post sternotomy wound complication or infection (mediastinitis)
 - 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
 - 5. open non-healing amputation site in diabetic
 - 6. delayed healing or non-healing of skin graft which is likely due to irregularly contoured or inadequate blood flood frotr1 0 0 1 273.41 427.27 Tmgelev1 10 g0 G[qu)3(ate)

Negative Pressure Wound Therapy-OH MCD-MM-0224 Effective Date: 03/01/2024





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Independent medical review ±4/2020

Approved ODM 11/16/2023