

POLICY NUMBER	LAST REVIEW DATE	APPROVED BY
MG.MM.DM.05g	04/12/2024	MPC (Medical Policy Committee)

IMPORTANT NOTE ABOUT THIS MEDICAL POLICY:

Property of ConnectiCare, Inc. All rights reserved. The treating physician or primary care provider must submit to ConnectiCare, Inc. the clinical evidence that the patient meets the criteria for the treatment or surgical procedure. Without this documentation and information, ConnectiCare will not be able to properly review the request for prior authorization. This clinical policy is not intended to pre-empt the judgment of the reviewing medical director or dictate to health care providers how to practice medicine. Health care providers are expected to exercise their medical judgment in rendering appropriate care. The clinical review criteria expressed below reflects how ConnectiCare determines whether certain services or supplies are medically necessary. ConnectiCare established the clinical review criteria based upon a review of currently available clinical information (including clinical outcome studies in the peer-reviewed published medical literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, views of physicians practicing in relevant clinical areas, and other relevant factors). ConnectiCare, Inc. expressly reserves the right to revise these conclusions as clinical information changes, and welcomes further relevant information. Identification of selected brand names of devices, tests and procedures in a medical coverage policy is for reference only and is not an endorsement of any one device, test or procedure over another. Each benefit plan defines which services are covered. The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered and/or paid for by ConnectiCare, as some plans exclude coverage for services or supplies that ConnectiCare considers medically necessary. If there is a discrepancy between this guideline and a member's benefits plan, the benefits plan will govern. In addition, coverage may be mandated by applicable legal requirements of the State of CT and/or the Federal Government. Coverage may also differ for our Medicare members based on any applicable Centers for Medicare & Medicaid Services (CMS) coverage statements including including National Coverage Determinations (NCD), Local Coverage Determinations (LCD) and/or Local Medical Review Policies(LMRP). All coding and web site links are accurate at time of publication.

Definitions

Negative-pressure wound therapy (NPWT)

Negative-pressure wound therapy (NPWT), or vacuum-assisted wound closure (VAC), is the controlled application of negative pressure to a wound with an electrical pump that intermittently or continuously conveys negative pressure through connective tubing to a specialized wound dressing. A resilient, open-cell, foam surface dressing, sealed with an occlusive dressing, contains the negative pressure at the wound site, thus promoting healing. The healing is associated with the removal of excess interstitial fluid, increased vascularity, decreased bacterial colonization and the stimulation of healthy tissue growth by drawing the edges of the wound toward the center. Lightweight versions may be used in the inpatient or outpatient settings.

Wound Documentation

For the initiation and continuation of NPWT, the following documentation, inclusive of original color photographs with date, time and member name must be provided to the Plan upon request:

- 1. Appearance color, odor, presence of granulation tissue, necrosis
- 2. Exudates color, amount, odor
- 3. Location
- 4. Size recorded measurement should be done each time the VAC is changed and should include a detailed wound description



Guideline

Members with the DME benefit are eligible for NPWT when the following criteria per wound type are met (see <u>Table 1</u> for pressure ulcer staging):

Presence of a chronic stage III or IV pressure ulcer; a neuropathic (e.g., diabetic) ulcer; an ulcer with venous or arterial insufficiency etiology; or a chronic ulcer (presence \geq 30 days) of mixed etiology

Note: The 30-day waiting period is waived for members with seronegative arthropathies and connective tissue disorder comorbidities in conjunction with acute wounds (as the presence of these disorders can inhibit the normal healing process)

A complete wound therapy program applicable to the type of wound has been ruled out, or attempted unsuccessfully, prior to NPWT initiation

- For all wounds, a wound therapy program must include a minimum of all the following general measures:
 - a. Determination of etiology and prior appropriate treatment of such
 - b. Documentation of wound (see Wound Documentation)
 - c. Application of dressings to ensure wound moisture
 - d. Debridement of necrotic tissue, as appropriate
 - e. Evaluation of, and provision for, adequate nutritional status
 - f. Documentation of wound onset date

Therapy programs for the following wound types require these additional measures:

Stage III and IV pressure ulcers

- a. Appropriate turning and repositioning
- Prior use of a group 2 or 3 support surface for posterior trunk or pelvis pressure ulcers (not a prerequisite for alternate wound sites)¹
- c. Appropriate treatment of moisture and incontinence

Neuropathic ulcers ²

- a. Comprehensive diabetes management program
- b. Foot-ulcer pressure reduction with contact casting or other method of pressure relief (e.g., Bledsoe boot), unless contraindicated, with the foot well vascularized.

Venous insufficiency ulcers

- a. Compression bandages or garments (e.g., Unna boot), unless contraindicated, have been applied
- b. Leg elevation and ambulation have been documented
- c. Maximal therapy for edema and swelling for ≥ 30 days prior to initiation of VAC

Ulcers and wounds encountered in an inpatient setting

- a. VAC therapy initiated per the judgment of the treating physician as the best available treatment option
- b. Complication of a surgically created wound (i.e., dehiscence), or a traumatic wound where there is documentation substantiating the medical necessity for accelerated formation of granulation tissue that cannot be achieved by other available topical wound treatments



The ongoing wound care is performed by a licensed health care provider and there is at least monthly documentation of wound characteristics (see <u>Wound Documentation</u>)

The recorded wound measurement demonstrates progressive wound healing without intervening complications from month to month

- 2. Skin Grafts
 - a. Comprehensive wound therapy
- 3. b. Adequate granulation bed
- 4. NPWT is considered medically necessary for members with peripheral arterial disease who have undergone revascularization

Limitations/Exclusions:

- 1. Disposable non-powered mechanical (e.g., Smart Negative Pressure [SNaP®] Wound Care Device) NPWT/VAC (CPT codes 97607, 97608, HCPCS code A9272) is considered experimental, investigational or unproven for any indication
- 2. Disposable single use battery-powered (e.g., PICO™ Single Use Negative Pressure Wound Therapy System, Prevena™ Incision Management System, V.A.C. Via™ Negative Pressure Wound Therapy System, MyNeWT Negative Pressure Wound Therapy System, Uno Negative Pressure Wound Therapy System) NPWT/VAC (CPT codes 97607, 97608, HCPCS code A9272) is considered experimental, investigational, or unproven for any indication.
- 3. NPWT is not considered medically necessary if the above criteria have not been met, or in the presence of any of the following:
 - a. Cancer in the wound
 - b. Necrotic tissue with eschar
 - c. Untreated osteomyelitis within the vicinity of the wound
 - d. Fistula to an organ or body cavity within the vicinity of the wound
- 4. NPWT continuation the majority of patients with stage III and IV ulcers achieve sufficient wound closure within 6 weeks of therapy. While coverage for > 4 months is generally not considered medically necessary, individual consideration will be given based upon required additional documentation. (See Wound Documentation)
- 5. NPWT discontinuation May be discontinued when the following are applicable:
 - a. Physician performs serial débridements (3-4x) within 90 days
 - b. Failure of any measurable degree of wound healing within prior month. (Grafts should heal in 7 days; no later than 1-month)

¹Types of pressure-reducing support surfaces per Medicare's Durable Medical Equipment Regional Carrier policies (listing of item does not necessarily indicate coverage):

 $[\]textbf{Group 2} - \text{Powered air flotation bed (low-air-loss therapy); powered, pressure-reducing air mattress; non-powered, advanced, pressure-reducing overlay for mattress, standard mattress length and width; powered air overlay for mattress, standard mattress length and width; non-powered, advanced, pressure-reducing mattress.$

Group 3 — Air-fluidized bed.

² Appropriate modalities must include a therapeutic device for off-loading. Lack of weight bearing alone does not meet this criterion.



- c. There must be documentation of quantitative measurements of wound characteristics (see Wound Documentation) over a specified time interval. The recorded wound measurements must be consistently and regularly updated and must demonstrate progressive wound healing from month to month
- d. No further changes in depth of wound
- e. Member is non-compliant
- f. Presence of sloughing > 20%
- g. No full thickness present

Table 1-Pressure Ulc	Table 1-Pressure Ulcer Staging		
Stage I	Non-blanchable erythema of intact skin		
Pressure Injury	Intact skin with a localized area of non-blanchable erythema, which may appear differently in darkly pigmented skin. Presence of blanchable erythema or changes in sensation, temperature, or firmness may precede visual changes. Color changes do not include purple or maroon discoloration; these may indicate deep tissue pressure injury.		
Stage II Pressure Injury	Partial-thickness skin loss with exposed dermis Partial-thickness loss of skin with exposed dermis.		
	The wound bed is viable, pink or red, moist, and may also present as an intact or ruptured serum-filled blister. Adipose (fat) is not visible and deeper tissues are not visible. Granulation tissue, slough and eschar are not present. These injuries commonly result from adverse microclimate and shear in the skin over the pelvis and shear in the heel. This stage should not be used to describe moisture associated skin damage (MASD) including incontinence associated dermatitis (IAD), intertriginous dermatitis (ITD), medical adhesive related skin injury (MARSI), or traumatic wounds (skin tears, burns, abrasions).		
Stage III	Full-thickness skin loss		
Pressure Injury	Full-thickness loss of skin, in which adipose (fat) is visible in the ulcer and granulation tissue and epibole (rolled wound edges) are often present. Slough and/or eschar may be visible. The depth of tissue damage varies by anatomical location; areas of significant adiposity can develop deep wounds. Undermining and tunneling may occur. Fascia, muscle, tendon, ligament, cartilage and/or bone are not exposed. If slough or eschar obscures the extent of tissue loss this is an Unstageable Pressure Injury.		
Stage IV	Full-thickness skin and tissue loss		
Pressure Injury	Full-thickness skin and tissue loss with exposed or directly palpable fascia, muscle, tendon, ligament, cartilage or bone in the ulcer. Slough and/or eschar may be visible. Epibole (rolled edges), undermining and/or tunneling often occur. Depth varies by anatomical location. If slough or eschar obscures the extent of tissue loss this is an Unstageable Pressure Injury.		
Unstageable Pressure Injury	Obscured full-thickness skin and tissue loss		



	Full-thickness skin and tissue loss in which the extent of tissue damage within the ulcer cannot be confirmed because it is obscured by slough or eschar. If slough or eschar is removed, a Stage 3 or Stage 4 pressure injury will be revealed. Stable eschar (i.e. dry, adherent, intact without erythema or fluctuance) on the heel or ischemic limb should not be softened or removed.
Deep Tissue Pressure Injury (DTI)	Persistent non-blanchable deep red, maroon or purple discoloration Intact or non-intact skin with localized area of persistent non-blanchable deep red, maroon, purple discoloration or epidermal separation revealing a dark wound bed or blood filled blister. Pain and temperature change often precede skin color changes. Discoloration may appear differently in darkly pigmented skin. This injury results from intense and/or prolonged pressure and shear forces at the bone- muscle interface. The wound may evolve rapidly to reveal the actual extent of tissue injury or may resolve without tissue loss. If necrotic tissue, subcutaneous tissue, granulation tissue, fascia, muscle or other underlying structures are visible, this indicates a full thickness pressure injury (Unstageable, Stage 3 or Stage 4). Do not use DTPI to describe vascular, traumatic, neuropathic, or dermatologic conditions.

Applicable Procedure Codes

97605	Negative pressure wound therapy (eg, vacuum assisted drainage collection), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area less than or equal to 50 square centimeters
97606	Negative pressure wound therapy (eg, vacuum assisted drainage collection), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area greater than 50 square centimeters
A6550	Wound care set, for negative pressure wound therapy electrical pump, includes all supplies and accessories
E2402	Negative pressure wound therapy electrical pump, stationary or portable
K0743	Suction pump, home model, portable, for use on wounds
K0744	Absorptive wound dressing for use with suction pump, home model, portable, pad size 16 sq in or less
K0745	Absorptive wound dressing for use with suction pump, home model, portable, pad size more than 16 sq in but less than or equal to 48 sq in
K0746	Absorptive wound dressing for use with suction pump, home model, portable, pad size greater than 48 sq in

Applicable ICD-10 Diagnosis Codes

E08.621	Diabetes mellitus due to underlying condition with foot ulcer
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer



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	Drug or chemical induced diabetes mellitus with foot ulcer
	Drug or chemical induced diabetes mellitus with other skin ulcer
	Type 1 diabetes mellitus with foot ulcer
	Type 1 diabetes mellitus with other skin ulcer
	Type 2 diabetes mellitus with foot ulcer
	Type 2 diabetes mellitus with other skin ulcer
	Other specified diabetes mellitus with foot ulcer
	Other specified diabetes mellitus with other skin ulcer Other specified peripheral vascular diseases
	Peripheral vascular disease, unspecified Pressure ulcer of unspecified elbow, stage 3
	Pressure ulcer of unspecified elbow, stage 4
	Pressure-induced deep tissue damage of unspecified elbow
	Pressure ulcer of right elbow, stage 3
	Pressure indused doep tissue damage of right olbow
	Pressure-induced deep tissue damage of right elbow Pressure ulcer of left elbow, stage 3
	Pressure ulcer of left elbow, stage 3 Pressure ulcer of left elbow, stage 4
	Pressure-induced deep tissue damage of left elbow
	Pressure ulcer of unspecified part of back, stage 3
	Pressure ulcer of unspecified part of back, stage 4
	Pressure-induced deep tissue damage of unspecified part of back
	Pressure ulcer of right upper back, stage 3
	Pressure ulcer of right upper back, stage 4
	Pressure-induced deep tissue damage of right upper back
	Pressure ulcer of left upper back, stage 3
	Pressure ulcer of left upper back, stage 5 Pressure ulcer of left upper back, stage 4
	Pressure-induced deep tissue damage of left upper back
	Pressure ulcer of right lower back, stage 3
	Pressure ulcer of right lower back, stage 4
	Pressure-induced deep tissue damage of right lower back
	Pressure ulcer of left lower back, stage 3
	Pressure ulcer of left lower back, stage 4
	Pressure-induced deep tissue damage of left lower back
	Pressure ulcer of sacral region, stage 3
	Pressure ulcer of sacral region, stage 4
L89.156	Pressure-induced deep tissue damage of sacral region
	Pressure ulcer of unspecified hip, stage 3
	Pressure ulcer of unspecified hip, stage 4
	Pressure-induced deep tissue damage of unspecified hip
	Pressure ulcer of right hip, stage 3
	Pressure ulcer of right hip, stage 4
	Pressure-induced deep tissue damage of right hip
	Pressure ulcer of left hip, stage 3
	Pressure ulcer of left hip, stage 4
	Pressure-induced deep tissue damage of left hip
L89.303	Pressure ulcer of unspecified buttock, stage 3
	Pressure ulcer of unspecified buttock, stage 4
	Pressure-induced deep tissue damage of unspecified buttock
	Pressure ulcer of right buttock, stage 3



L89.314	Pressure ulcer of right buttock, stage 4
L89.316	Pressure-induced deep tissue damage of right buttock
L89.323	Pressure ulcer of left buttock, stage 3
L89.324	Pressure ulcer of left buttock, stage 4
L89.326	Pressure-induced deep tissue damage of left buttock
L89.43	Pressure ulcer of contiguous site of back, buttock and hip, stage 3
L89.44	Pressure ulcer of contiguous site of back, buttock and hip, stage 4
L89.46	Pressure-induced deep tissue damage of contiguous site of back, buttock and hip
L89.503	Pressure ulcer of unspecified ankle, stage 3
L89.504	Pressure ulcer of unspecified ankle, stage 4
L89.506	Pressure-induced deep tissue damage of unspecified ankle
L89.513	Pressure ulcer of right ankle, stage 3
L89.514	Pressure ulcer of right ankle, stage 4
L89.516	Pressure-induced deep tissue damage of right ankle
L89.523	Pressure ulcer of left ankle, stage 3
L89.524	Pressure ulcer of left ankle, stage 4
L89.526	Pressure-induced deep tissue damage of left ankle
L89.603	Pressure ulcer of unspecified heel, stage 3
L89.604	Pressure ulcer of unspecified heel, stage 4
L89.606	Pressure-induced deep tissue damage of unspecified heel
L89.613	Pressure ulcer of right heel, stage 3
L89.614	Pressure ulcer of right heel, stage 4
L89.616	Pressure-induced deep tissue damage of right heel
L89.623	Pressure ulcer of left heel, stage 3
L89.624	Pressure ulcer of left heel, stage 4
L89.626	Pressure-induced deep tissue damage of left heel
L89.813	Pressure ulcer of head, stage 3
L89.814	Pressure ulcer of head, stage 4
L89.816	Pressure-induced deep tissue damage of head
L89.893	Pressure ulcer of other site, stage 3
L89.894	Pressure ulcer of other site, stage 4
L89.896	Pressure-induced deep tissue damage of other site
L89.93	Pressure ulcer of unspecified site, stage 3
L89.94	Pressure ulcer of unspecified site, stage 4
L89.96	Pressure-induced deep tissue damage of unspecified site
L97.101	Non-pressure chronic ulcer of unspecified thigh limited to breakdown of skin
L97.102	Non-pressure chronic ulcer of unspecified thigh with fat layer exposed
L97.103	Non-pressure chronic ulcer of unspecified thigh with necrosis of muscle
L97.104	Non-pressure chronic ulcer of unspecified thigh with necrosis of bone
L97.105	Non-pressure chronic ulcer of unspecified thigh with muscle involvement without evidence of necrosis
L97.106	Non-pressure chronic ulcer of unspecified thigh with bone involvement without evidence of necrosis
L97.108	Non-pressure chronic ulcer of unspecified thigh with other specified severity
L97.109	Non-pressure chronic ulcer of unspecified thigh with unspecified severity
L97.111	Non-pressure chronic ulcer of right thigh limited to breakdown of skin
L97.112	Non-pressure chronic ulcer of right thigh with fat layer exposed
L97.113	Non-pressure chronic ulcer of right thigh with necrosis of muscle
L97.114	Non-pressure chronic ulcer of right thigh with necrosis of bone
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L97.115	Non-pressure chronic ulcer of right thigh with muscle involvement without evidence of necrosis
L97.116	Non-pressure chronic ulcer of right thigh with bone involvement without evidence of necrosis
L97.118	Non-pressure chronic ulcer of right thigh with other specified severity
L97.119	Non-pressure chronic ulcer of right thigh with unspecified severity
L97.121	Non-pressure chronic ulcer of left thigh limited to breakdown of skin
L97.122	Non-pressure chronic ulcer of left thigh with fat layer exposed
L97.123	Non-pressure chronic ulcer of left thigh with necrosis of muscle
L97.124	Non-pressure chronic ulcer of left thigh with necrosis of bone
L97.125	Non-pressure chronic ulcer of left thigh with muscle involvement without evidence of
	necrosis
L97.126	Non-pressure chronic ulcer of left thigh with bone involvement without evidence of necrosis
L97.128	Non-pressure chronic ulcer of left thigh with other specified severity
L97.129	Non-pressure chronic ulcer of left thigh with unspecified severity
L97.201	Non-pressure chronic ulcer of unspecified calf limited to breakdown of skin
L97.202	Non-pressure chronic ulcer of unspecified calf with fat layer exposed
L97.203	Non-pressure chronic ulcer of unspecified calf with necrosis of muscle
L97.204	Non-pressure chronic ulcer of unspecified calf with necrosis of bone
L97.205	Non-pressure chronic ulcer of unspecified calf with muscle involvement without
	evidence of necrosis
L97.206	Non-pressure chronic ulcer of unspecified calf with bone involvement without
	evidence of necrosis
L97.208	Non-pressure chronic ulcer of unspecified calf with other specified severity
L97.209	Non-pressure chronic ulcer of unspecified calf with unspecified severity
L97.211	Non-pressure chronic ulcer of right calf limited to breakdown of skin
L97.212	Non-pressure chronic ulcer of right calf with fat layer exposed
L97.213	Non-pressure chronic ulcer of right calf with necrosis of muscle
L97.214	Non-pressure chronic ulcer of right calf with necrosis of bone
L97.215	Non-pressure chronic ulcer of right calf with muscle involvement without evidence of necrosis
L97.216	Non-pressure chronic ulcer of right calf with bone involvement without evidence of
1000010	necrosis
L97.218	Non-pressure chronic ulcer of right calf with other specified severity
L97.219	Non-pressure chronic ulcer of right calf with unspecified severity
L97.221	Non-pressure chronic ulcer of left calf limited to breakdown of skin
L97.222	Non-pressure chronic ulcer of left calf with fat layer exposed
L97.223	Non-pressure chronic ulcer of left calf with necrosis of muscle Non-pressure chronic ulcer of left calf with necrosis of bone
L97.224 L97.225	Non-pressure chronic ulcer of left calf with muscle involvement without evidence of
	necrosis
L97.226	Non-pressure chronic ulcer of left calf with bone involvement without evidence of necrosis
L97.228	Non-pressure chronic ulcer of left calf with other specified severity
L97.229	Non-pressure chronic ulcer of left calf with unspecified severity
L97.301	Non-pressure chronic ulcer of unspecified ankle limited to breakdown of skin
L97.302	Non-pressure chronic ulcer of unspecified ankle with fat layer exposed
L97.303	Non-pressure chronic ulcer of unspecified ankle with necrosis of muscle
L97.304	Non-pressure chronic ulcer of unspecified ankle with necrosis of bone
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L97.305	Non-pressure chronic ulcer of unspecified ankle with muscle involvement without evidence of necrosis
L97.306	Non-pressure chronic ulcer of unspecified ankle with bone involvement without evidence of necrosis
L97.308	Non-pressure chronic ulcer of unspecified ankle with other specified severity
L97.309	Non-pressure chronic ulcer of unspecified ankle with unspecified severity
L97.311	Non-pressure chronic ulcer of right ankle limited to breakdown of skin
L97.312	Non-pressure chronic ulcer of right ankle with fat layer exposed
L97.313	Non-pressure chronic ulcer of right ankle with necrosis of muscle
L97.314	Non-pressure chronic ulcer of right ankle with necrosis of bone
L97.315	Non-pressure chronic ulcer of right ankle with muscle involvement without evidence
	of necrosis
L97.316	Non-pressure chronic ulcer of right ankle with bone involvement without evidence of necrosis
L97.318	Non-pressure chronic ulcer of right ankle with other specified severity
L97.319	Non-pressure chronic ulcer of right ankle with unspecified severity
L97.321	Non-pressure chronic ulcer of left ankle limited to breakdown of skin
L97.322	Non-pressure chronic ulcer of left ankle with fat layer exposed
L97.323	Non-pressure chronic ulcer of left ankle with necrosis of muscle
L97.324	Non-pressure chronic ulcer of left ankle with necrosis of bone
L97.325	Non-pressure chronic ulcer of left ankle with muscle involvement without evidence of
	necrosis
L97.326	Non-pressure chronic ulcer of left ankle with bone involvement without evidence of necrosis
L97.328	Non-pressure chronic ulcer of left ankle with other specified severity
L97.329	Non-pressure chronic ulcer of left ankle with unspecified severity
L97.401	Non-pressure chronic ulcer of unspecified heel and midfoot limited to breakdown of skin
L97.402	Non-pressure chronic ulcer of unspecified heel and midfoot with fat layer exposed
L97.403	Non-pressure chronic ulcer of unspecified heel and midfoot with necrosis of muscle
L97.404	Non-pressure chronic ulcer of unspecified heel and midfoot with necrosis of bone
L97.405	Non-pressure chronic ulcer of unspecified heel and midfoot with muscle involvement without evidence of necrosis
L97.406	Non-pressure chronic ulcer of unspecified heel and midfoot with bone involvement without evidence of necrosis
L97.408	Non-pressure chronic ulcer of unspecified heel and midfoot with other specified severity
L97.409	Non-pressure chronic ulcer of unspecified heel and midfoot with unspecified severity
L97.411	Non-pressure chronic ulcer of right heel and midfoot limited to breakdown of skin
L97.412	Non-pressure chronic ulcer of right heel and midfoot with fat layer exposed
L97.413	Non-pressure chronic ulcer of right heel and midfoot with necrosis of muscle
L97.414	Non-pressure chronic ulcer of right heel and midfoot with necrosis of bone
L97.419	Non-pressure chronic ulcer of right heel and midfoot with unspecified severity
L97.421	Non-pressure chronic ulcer of left heel and midfoot limited to breakdown of skin
L97.422	Non-pressure chronic ulcer of left heel and midfoot with fat layer exposed
L97.423	Non-pressure chronic ulcer of left heel and midfoot with necrosis of muscle
L97.424	Non-pressure chronic ulcer of left heel and midfoot with necrosis of bone
L97.429	Non-pressure chronic ulcer of left heel and midfoot with unspecified severity
L97.501	Non-pressure chronic ulcer of other part of unspecified foot limited to breakdown of
	skin



197.503 Non-pressure chronic ulcer of other part of unspecified foot with necrosis of muscle		
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L97.914 Non-pressure chronic ulcer of unspecified part of right lower leg with necrosis of bone	L97.913	
	107.014	
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L97.919	Non-pressure chronic ulcer of unspecified part of right lower leg with unspecified
	severity
L97.921	Non-pressure chronic ulcer of unspecified part of left lower leg limited to breakdown of skin
L97.922	Non-pressure chronic ulcer of unspecified part of left lower leg with fat layer exposed
L97.923	Non-pressure chronic ulcer of unspecified part of left lower leg with rac layer exposed Non-pressure chronic ulcer of unspecified part of left lower leg with necrosis of
L97.923	muscle
L97.924	Non-pressure chronic ulcer of unspecified part of left lower leg with necrosis of bone
L97.929	Non-pressure chronic ulcer of unspecified part of left lower leg with unspecified severity
L98.411	Non-pressure chronic ulcer of buttock limited to breakdown of skin
L98.412	Non-pressure chronic ulcer of buttock with fat layer exposed
L98.413	Non-pressure chronic ulcer of buttock with necrosis of muscle
L98.414	Non-pressure chronic ulcer of buttock with necrosis of bone
L98.419	Non-pressure chronic ulcer of buttock with unspecified severity
L98.421	Non-pressure chronic ulcer of back limited to breakdown of skin
L98.422	Non-pressure chronic ulcer of back with fat layer exposed
L98.423	Non-pressure chronic ulcer of back with necrosis of muscle
L98.424	Non-pressure chronic ulcer of back with necrosis of bone
L98.429	Non-pressure chronic ulcer of back with unspecified severity
L98.491	Non-pressure chronic ulcer of skin of other sites limited to breakdown of skin
L98.492	Non-pressure chronic ulcer of skin of other sites with fat layer exposed
L98.493	Non-pressure chronic ulcer of skin of other sites with necrosis of muscle
L98.494	Non-pressure chronic ulcer of skin of other sites with necrosis of bone
L98.499	Non-pressure chronic ulcer of skin of other sites with unspecified severity
T86.820	Skin graft (allograft) rejection
T86.821	Skin graft (allograft) (autograft) failure
T86.822	Skin graft (allograft) (autograft) infection
T86.828	Other complications of skin graft (allograft) (autograft)
T86.829	Unspecified complication of skin graft (allograft) (autograft)

References

Specialty-matched clinical peer review.

Revision history

DATE	REVISION
04/12/2024	Added indication for wounds secondary to peripheral arterial disease
	Added investigational device examples with applicable coding to Limitations/Exclusions section
04/09/2021	Added skin grafts as covered indication.



10/16/2020	Reformatted and reorganized policy, transferred content to new CCI template. ConnectiCare has adopted the clinical criteria for its parent company, EmblemHealth
02/10/2017	Waived 30-day waiting period for members with seronegative arthropathies and connective tissue disorder comorbidities in conjunction with acute wounds.