

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:		
Policy and Procedure Title: Wound Care Clinical Coverage policy			
Process Cycle: Annually		Responsible Departments: Clinical	
Approved By: Patricia Jones, RN		Issue Date: 1/1/23	Revised:

PURPOSE: The purpose of this policy is to define Wound Care services and the criteria for medical necessity for Humana Healthy Horizons in Louisiana.

POLICY AND PROCEDURE:

Policy: Wound Care Clinical Coverage Policy

Procedure:

Wound Care Supplies

Surgical dressings, bandages, and other wound care supplies may receive 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:

1. 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;
2. Appropriate medical history related to the current wound;
3. Wound measurements to include length, width and depth, any tunneling and/or undermining;
4. Wound color, drainage (type and amount) and odor, if present;
5. The prescribed wound care regimen, to include frequency, duration and supplies needed;
6. Treatment for infection, if present;
7. The member's use of a pressure reducing mattress and/or cushion, when appropriate; and
8. Whether or not a home health agency is involved in the care.

The prescription must be updated for any extensions to be granted.

A Medicaid 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 by the DMEPOS Program must be provided in the skilled nursing visit rate.

Wound Care System

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Wound care systems may be considered for reimbursement when prior authorized. A wound care system may be considered for reimbursement for members 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:

1. Thermal wound care system; and
2. 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.

ADDITIONAL RESOURCES:

Louisiana Department of Health, Durable Medical Equipment Provider Manual, Chapter eighteen of the Medicaid Services Manual; [DME \(lamedicaid.com\)](https://lamedicaid.com). Accessed August 16, 2022.

VERSION CONTROL:

Version.Review.Approval History				
Department:	Purpose of Review	Reviewed and Approved By:	Date:	Additional Comments:
Clinical	Policy Development	Tiffany LeBlanc	8/18/2022	
Clinical	Policy Review	Patricia Jones/Cali Brou	8/22/2022	
Clinical	Policy Review	Dr. Ian Nathanson, VP Medicaid Clinical	8/22/2022	
Clinical	Adoption Review	Medicaid Quality Governance Committee	8/25/2022	Committee approved. Ben Thompson, Committee Chair

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DISCLAIMER:

Humana follows all federal and state laws and regulations. Where more than one state is impacted by an issue, to allow for consistency, Humana will follow the most stringent requirement.

This document is intended as a guideline. Situations may arise in which professional judgment may necessitate actions that differ from the guideline. Circumstances that justify the variation from the guideline should be noted and submitted to the appropriate business area for review and documentation. This (policy/procedure) is subject to change or termination by Humana at any time. Humana has full and final discretionary authority for its interpretation and application. This (policy/procedure) supersedes all other policies, requirements, procedures or information conflicting with it. If viewing a printed version of this document, please refer to the electronic copy maintained by CMU to ensure no modifications have been made.

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