

# Wound Care

**DRAFT**

**Humana**

Medicaid Medical Coverage Policy

Original Effective Date: 08/22/2022

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Line of Business: Medicaid

State: LA

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### Summary of Changes:

10/11/24: Annual Review, minor grammatical changes and updated references to most recent edition reviewed. Updated to include language "require prior authorization and medically necessary."

1/20/2025: Approved by LDH

### Scope:

This policy applies to all Humana Healthy Horizons<sup>®</sup> in Louisiana (Plan) associates who administer, review, or communicate covered physical and behavioral health benefits and services to eligible enrolled members.

### Policy:

## **Description**

**Wound care is the process of managing and promoting the healing of various types of wounds, such as surgical incisions, pressure ulcers and traumatic injuries. Chronic wounds that do not progress through the typical stages of healing or that have failed to heal over a prolonged period of time often require complex, long-term care tailored to the specific needs of the individual to optimize healing and reduce complications.**

**Wound care systems such as portable hyperbaric oxygen chambers are small devices that deliver high concentrations of topical pressurized oxygen directly over a wound to treat damaged tissue. (Refer to Coverage Limitations section)**

**Wound care supplies and wound care systems require prior authorization.**

**Any routine supplies provided by the home health agency that are not covered by the durable medical equipment prosthetic/orthotic supplies (DMEPOS) program must be provided in the skilled nursing visit rate.**

## **Coverage Determination**

### Wound Care Supplies

~~Surgical dressings, bandages, and other wound care supplies may receive prior approval (PA) for three months at a time.~~

**Humana Healthy Horizons in Louisiana members may be eligible under the Plan for wound care supplies for three months at a time when the following requirements are met:**

~~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:~~

- **An approved home health agency is involved in the care of the member; AND**
- **Documentation requirements;**

### **ALL of the following:**

- 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;
- **The prescribed wound care regimen, to include frequency, duration and supplies needed;**

- The prescription for the requested services;
- Treatment for infection, if present;
- Whether or not a home health agency is involved in the care;
- Wound color, drainage (type and amount) and odor, if present;
- Wound measurements to include length, width and depth, any tunneling and/or undermining.

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

#### Extension of Wound Care Supplies

Humana Healthy Horizons in Louisiana members may be eligible under the Plan for an extension of wound care supplies when the following requirements are met:

- ALL the requirements in the Wound Care Supplies section above are met; AND
- The prescription for the wound care regimen has been updated to reflect the new request.

~~An 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 durable medical equipment prosthetic/orthotic supplies (DMEPOS) program must be provided in the skilled nursing visit rate.~~

#### Wound Care Systems

~~Wound care systems require prior authorization.~~

Humana Healthy Horizons in Louisiana members may be eligible under the Plan for wound care systems for the following indications:

~~A wound care system may be considered medically necessary for members with:~~

#### BOTH of the following:

- Type of wound:
  - Stage III or IV chronic, nonhealing wounds such as (eg, pressure, venous stasis and diabetic ulcers);
  - OR
  - Postsurgical wound dehiscence; OR
  - Non-adhering skin grafts; ~~or~~ OR
  - Surgical flaps required for covering such wounds;

#### AND

- Type of wound care systems include the following;
  - Thermal wound care system; and OR
  - 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.~~

## **Coverage Limitations**

**Humana Healthy Horizons in Louisiana members may NOT be eligible under the Plan for portable hyperbaric oxygen chambers for topical oxygen therapy.**

**A review of the current medical literature shows that the evidence is insufficient to determine that this service is standard medical treatment. There is an absence of current, widely-used treatment guidelines or acceptable clinical literature examining benefit and long-term clinical outcomes establishing the value of this service in clinical management.**

Definitions:

N/A

## **References**

1. **Louisiana Department of Health. Medicaid Services Manual. Chapter 18: Durable Medical Equipment. <https://ldh.la.gov/medicaid>. Published September 1, 2025. Updated June 25, 2025.**

~~State of Louisiana Bureau of Health Services Financing. Durable Medical Equipment Provider Manual, Chapter Eighteen of the Medicaid Services Manual, DME (2/28/2023). Accessed (10/11/2024).~~

## **Change Summary**

Version Control:

08/22/2022: Policy Creation-Approved by LDH for Readiness

05/15/2023: Approved by LA UM Committee

09/07/2023: Changed to new template for Annual Review Due by 5.15.24.

01/12/2024: Minor changes made.

01/20/2025: Approved by LDH.

**10/07/2025: Annual Review, No Coverage Change. New Clinical Coverage Policy Template**

Non-Compliance:

~~Failure to comply with any part of Humana's policies, procedures, and guidelines may result in disciplinary actions up to and including termination of employment, services, or relationship with Humana. In addition, state and/or federal agencies may take action in accordance with applicable laws, rules, and regulations.~~

~~Any unlawful act involving Humana systems or information may result in Humana turning over all evidence of unlawful activity to appropriate authorities. Information on handling sanctions related to noncompliance with this policy may be found in the Expectations for Performance, and Critical Offenses policies, both of~~

which may be found in the Associate Support Center via Humana's secure intranet on Hi! (Workday & Apps/Associate Support Center).