

Policy References: [Local Coverage Determination NPWT \(L33821\)](#) and [Policy Article \(A52511\)](#)

Documentation References: [Standard Documentation Requirements Policy Article \(PA\) A55426](#)

The treating clinician must complete the following items:

- [Standard Written Order \(SWO\)](#)
- Medical record documentation requirements (see below)

Indications for Coverage

NPWT is indicated for **initiating** healing of problem wounds described below, and is not indicated for **complete** wound healing. The coverage is for up to three months if necessary, and NPWT is not indicated if a measurable degree of wound healing has failed to occur over the prior month. If the beneficiary needs NPWT after three months of initial therapy, please review the NPWT Continued Coverage checklist for additional information.

Ulcers and wounds that may be covered when encountered in an inpatient setting:

- An ulcer/wound described in the NPWT in the Home setting checklist is encountered in the inpatient setting and, after wound treatments described in that checklist have been tried or considered and ruled out, NPWT is initiated because it is considered by the treating physician to be the best available treatment option; **or**
- The beneficiary has complications of a surgically created wound or traumatic wound, where there is documentation for the need for accelerated formation of granulation tissue which cannot be achieved by other topical wound treatments.

Non-Covered Indications Include:

- The presence in the wound of necrotic tissue with eschar, if debridement is not attempted
- Osteomyelitis within the vicinity of the wound that is not concurrently being treated with intent to cure
- Cancer present in the wound
- The presence of an open fistula to an organ or body cavity within the vicinity of the wound

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Medical Documentation

- A licensed medical professional must directly assess the wounds and supervise or directly perform the NPWT dressing changes. Documentation should include wound measurements, the length of need, dressing types required, frequency of change, changes in wound conditions, quantity of exudates, presence of granulation and necrotic tissue and concurrent measures being addressed relevant to wound therapy.
- On at least a monthly basis, the treating practitioner must document changes in the ulcer's dimensions and characteristics and provide an assessment of wound healing progress based upon the wound measurements. Please give this documentation to your DME supplier upon request.
- Please review the LCD referenced above for the allowable amount of supplies. If ordering for quantities greater than the allowable amounts, document why the beneficiary needs the additional quantities, and give this documentation to your DME supplier upon request.