

Policy References: [Local Coverage Determination Pressure Reducing Support Surfaces - Group 2 \(L33642\)](#) and [Policy Article \(A52490\)](#)

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)

Medical Documentation

A beneficiary needing a Pressure Reducing Support Surface (PRSS) should have a wound care plan which has been established by the beneficiary's physician or home care nurse, is documented in the beneficiary's medical records, and which includes all of the following components:

- Use of an appropriate group 1 support surface, **and**
- Regular assessment by a nurse, physician, or other licensed healthcare practitioner, **and**
- Appropriate turning and positioning, **and**
- Appropriate wound care, **and**
- Appropriate management of moisture/incontinence, **and**
- Nutritional assessment and intervention consistent with the overall plan of care

A group 2 support surface is covered if the beneficiary meets at least one of the following three coverage criteria:

- The beneficiary has multiple stage II pressure ulcers located on trunk or pelvis which have failed to improve over the past month (30 days) while using an appropriate Group 1 support surface, and during which the beneficiary has been on a comprehensive ulcer treatment program as detailed above.]
- The beneficiary has large or multiple stage III or IV pressure ulcer(s) on trunk or pelvis.
- The beneficiary had a recent (within past 60 days) myocutaneous flap or skin graft for a pressure ulcer on the trunk or pelvis, and been on a Group 2 or 3 support surface immediately prior to discharge from a hospital or nursing facility within the past 30 days. In this scenario, coverage is generally limited to 60 days from the date of surgery. In this scenario, coverage is generally limited to 60 days from the date of surgery.