

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

CLINICAL BENEFIT	<input type="checkbox"/> MINIMIZE SAFETY RISK OR CONCERN. <input type="checkbox"/> MINIMIZE HARMFUL OR INEFFECTIVE INTERVENTIONS. <input type="checkbox"/> ASSURE APPROPRIATE LEVEL OF CARE. <input type="checkbox"/> ASSURE APPROPRIATE DURATION OF SERVICE FOR INTERVENTIONS. <input checked="" type="checkbox"/> ASSURE THAT RECOMMENDED MEDICAL PREREQUISITES HAVE BEEN MET. <input type="checkbox"/> ASSURE APPROPRIATE SITE OF TREATMENT OR SERVICE.
Effective date:	6/1/2026

POLICY

INITIATION OF A POWERED NEGATIVE PRESSURE WOUND THERAPY

An initial therapeutic trial of not less than 2 weeks using a powered negative pressure wound therapy (NPWT) system, as part of a comprehensive wound care program that includes controlling factors (e.g., diabetes, nutrition, relief of pressure) may be considered **medically necessary** in the following indications:

- Chronic (> 90 days) stage III or IV pressure ulcers that have failed to heal despite optimal wound care when there is high-volume drainage that interferes with healing and/or when standard dressings cannot be maintained due to anatomic factors; OR
- Wounds in individuals with underlying clinical conditions that are known to negatively impact wound healing, which are nonhealing (at least 30 days), despite optimal wound care. (Examples of underlying conditions include, but are not limited to diabetes, malnutrition, small vessel disease, and morbid obesity. Malnutrition, while a risk factor, must be addressed simultaneously with the NPWT.); OR
- Traumatic or surgical wounds where there has been a failure of immediate or delayed primary closure, AND there is exposed bone, cartilage, tendon, or foreign material within the wound.

CONTINUATION OF POWERED NEGATIVE PRESSURE WOUND THERAPY

Continuation of the powered NPWT system, as part of a comprehensive wound care program, may be considered **medically necessary** following an initial 2-week therapeutic trial if the treatment trial has resulted in documented objective improvements in the wound, and if there is ongoing objective improvement during subsequent treatment. Objective improvements in the wound should include the development and presence of healthy granulation tissue, progressive wound contracture and decreasing depth, and/or the commencement of epithelial spread from the wound margins.

Continuation of the powered NPWT system is considered **investigational** when any of the following occurs:

- The therapeutic trial or subsequent treatment period has not resulted in documented objective improvement in the wound, OR

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

- The wound has developed evidence of wound complications contraindicating continued NPWT, OR
- The wound has healed to an extent that either grafting can be performed or the wound can be anticipated to heal completely with other wound care treatments.

Therapeutic trials of powered NPWT systems for the treatment of other acute or chronic wounds except as noted above are considered **investigational**. There is insufficient evidence to support a general conclusion concerning the health outcomes or benefits associated with this procedure.

Use of single-use NPWT systems (powered or nonpowered) is considered **investigational** for the treatment of acute or chronic wounds, including but not limited to diabetic, venous, surgical, and traumatic wounds.

Policy Guidelines

Contraindications to the use of negative pressure wound therapy (NPWT) systems include the following conditions as noted in a 2009 U.S. Food and Drug Administration (FDA) alert: necrotic tissue with eschar, untreated osteomyelitis, nonenteric and unexplored fistulae, malignancy in the wound, exposed nerve, exposed anastomotic site, and exposed organ.

In a 2011 update, the FDA noted additional deaths and injury reports with NPWT since 2009. Although rare, these complications can occur wherever NPWT systems are used, including hospitals, long-term care facilities, and at home. Bleeding was the cause of the most serious adverse events, including deaths. Most reports of wound infection were related to the retention of dressing pieces in the wounds. Recommendations for health care providers include the following: select individuals for NPWT carefully knowing that NPWT systems are contraindicated for certain wound types, and individual risk factors must be thoroughly considered before use; assure that the individual is monitored frequently in an appropriate care setting by a trained practitioner; be aware of complications associated with dressing changes such as infection and bleeding; be vigilant for potentially life-threatening complications, such as bleeding; and be prepared to take prompt action if they occur. The FDA reported that the safety and effectiveness of NPWT systems in newborns, infants, and children had not been established and, currently, there are no NPWT systems cleared for use in these populations.

Continuation of healing during use of the NPWT system should be monitored on a frequency of not less than every 14 days.

Complete healing of a wound would normally be anticipated if all bone, cartilage, tendons, and foreign material were completely covered, healthy granulation were present to within 5 mm of the surface, and the wound edges were reduced to 2 cm in width or diameter.

Powered NPWT systems should be used as part of a comprehensive wound care program that includes attention to other factors that impact wound healing such as diabetes control, nutritional status, and relief of pressure.

The focus of these policy statements and guidelines is for the use of NPWT in the outpatient setting.

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

Cross-References:

MP 1.158 Bio Engineered Skin, Soft Tissue Substitutes and Amniotic Membranes

MP 2.033 Recombinant and Autologous Platelet-Derived Growth Factors as a Treatment of Wound Healing and Other Non-Orthopedic Conditions

MP 2.070 Hyperbaric Oxygen Therapy

MP 4.028 Wound and Burn Management and Specialized Treatment Centers

MP 6.026 Durable Medical Equipment (DME) and Supplies

PRODUCT VARIATIONS

This policy is only applicable to certain programs and products administered by Capital Blue Cross and subject to benefit variations. Please see additional information below.

FEP PPO - Refer to FEP Medical Policy Manual. The FEP Medical Policy manual can be found at:

<https://www.fepblue.org/benefit-plans/medical-policies-and-utilization-management-guidelines/medical-policies>

DESCRIPTION/BACKGROUND

Chronic Wounds

Management

The management and treatment of chronic wounds, including decubitus ulcers, is challenging. Furthermore, certain racial and ethnic groups, including African Americans, Hispanics, and Native Americans, experience higher diabetes prevalence, contributing to disparities in the risk for diabetic ulcers; these disparities are exacerbated when inequalities in access to health care result in delayed diagnosis and management.

Most chronic wounds will heal only if the underlying cause, i.e., venous stasis, pressure, infection, etc., is addressed. In addition, cleaning the wound to remove nonviable tissue, microorganisms, and foreign bodies is essential to create the optimal conditions for either re-epithelialization (i.e., healing by secondary intention) or preparation for wound closure with skin grafts or flaps (i.e., healing by primary intention). Therefore, debridement, irrigation, whirlpool treatments, and wet-to-dry dressings are common components of chronic wound care.

Negative pressure wound therapy (NPWT) consists of the use of a negative pressure therapy or suction device to aspirate and remove fluids, debris, and infectious materials from the wound bed to promote the formation of granulation tissue. The devices may be used as an adjunct to surgical therapy or as an alternative to surgery in a debilitated patient. Although the exact mechanism has not been elucidated, it is hypothesized that negative pressure contributes to wound healing by removing excess interstitial fluid, increasing the vascularity of the wound, reducing edema, and/or creating beneficial mechanical forces that lead to cell growth and expansion.

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

A non-powered (mechanical) NPWT system has also been developed; the Smart Negative Pressure (SNaP) Wound Care System is portable and lightweight (3 oz.) and can be worn underneath clothing. This system consists of a cartridge, dressing, and strap; the cartridge acts as the negative pressure source. The system is reported to generate negative pressure levels similar to other NPWT systems. This system is fully disposable.

The focus of this evidence review is the use of NPWT in the outpatient setting. It is recognized that patients may begin using the device in the inpatient setting as they transition to the outpatient setting.

Regulatory Status

Negative pressure therapy or suction devices cleared by the U.S. Food and Drug Administration (FDA) for treating chronic wounds include, but are not limited to: Vacuum-Assisted Closure® Therapy (V.A.C., also known as negative pressure wound therapy; 3M™/KCI); Versatile 1™ (V1) Wound Vacuum System (Blue Sky Medical), RENASYS™ EZ PLUS (Smith & Nephew), Foryou NPWT NP32 Device (Foryou Medical Electronics), SVED® (Cardinal Health), and PICO Single Use Negative Pressure Wound Therapy System (Smith & Nephew).

Portable systems include the RENASYS™ GO (Smith & Nephew), XLR8 PLUS (Genadyne Biotechnologies), extriCARE® 2400 NPWT System (Devon Medical), the V.A.C. Via™ (KCI), NPWT PRO to GO (Cardinal Health), and the PICO Single Use Negative Pressure Wound Therapy System (Smith & Nephew). The Prevena™ Incision Management System (KCI) is designed specifically for closed surgical incisions.

A nonpowered NPWT device, the SNaP® Wound Care System (now SNAP™ Therapy System) (3M™/ previously Spiracur, acquired by Acelyty in 2015), is a class II device requiring notification to market but not having the FDA premarket approval. In 2009, it was cleared for marketing by the FDA through the 510(k) pathway (K081406) and is designed to remove small amounts of exudate from chronic, traumatic, dehisced, acute, or subacute wounds and diabetic and pressure ulcers.

Negative pressure wound therapy devices with instillation include the V.A.C. VERAFLOR™ Therapy device (3M™/KCI/Acelity). It was cleared for marketing in 2011 by the FDA through the 510(k) pathway (K103156) and is designed to allow for controlled delivery and drainage of topical antiseptic and antimicrobial wound treatment solutions and suspensions. It is to be used with the V.A.C. Ultra unit, which is commercially marketed for use in the hospital setting. Instillation is also available with Simultaneous Irrigation™ Technology tubing sets (Cardinal Health) for use with Cardinal Health SVED® and PRO NPWT devices, however, its use is not indicated for use in a home care setting (K161418).

No NPWT device has been cleared for use in infants and children.

In November 2009, the FDA issued an alert concerning complications and deaths associated with NPWT systems. An updated alert was issued in February 2011.

FDA product code: OMP.

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

RATIONALE

SUMMARY OF EVIDENCE

For individuals who have diabetic lower-extremity ulcers or amputation wounds who receive outpatient negative pressure wound therapy (NPWT), the evidence includes systematic reviews of randomized controlled trials (RCTs). Relevant outcomes are symptoms, change in disease status, morbid events, quality of life (QOL), and treatment-related morbidity. There was a higher rate of wound healing and fewer amputations with NPWT, although the studies were at risk of bias due to lack of blinding. The evidence is sufficient to determine that the technology results in an improvement in the net health outcome.

For individuals who have diabetic lower-extremity ulcers or amputation wounds who receive portable, single-use outpatient NPWT, the evidence includes RCTs. Relevant outcomes are symptoms, change in disease status, morbid events, QOL, and treatment-related morbidity. A 2019 RCT compared the PICO device with standard NPWT. In this study, the PICO device demonstrated noninferiority for wound area reduction. A statistically significant benefit in complete wound closure was noted for patients with diabetic foot ulcers but was not duplicated in the per protocol population due to a high number of exclusions. One study of the SNaP System showed noninferiority to a V.A.C. device for wound size reduction. No significant difference in complete wound closure was reported. Interpretation of this study is limited by a high loss to follow-up. Well-designed comparative studies with larger numbers of patients powered to detect differences in complete wound closure are needed. The evidence is insufficient to determine that the technology results in an improvement in the net health outcome.

For individuals who have chronic pressure ulcers who receive outpatient NPWT, the evidence includes RCTs and systematic reviews. Relevant outcomes are symptoms, change in disease status, morbid events, QOL, and treatment-related morbidity. All trials are of low quality and at high risk of bias. Also, most study populations were treated in inpatient settings. The evidence is insufficient to determine that the technology results in an improvement in the net health outcome.

For individuals who have lower-extremity ulcers due to venous insufficiency who receive outpatient NPWT, the evidence includes an RCT and a systematic review. Relevant outcomes are symptoms, change in disease status, morbid events, QOL, and treatment-related morbidity. A single RCT in patients with nonhealing leg ulcers who were treated with skin grafts found a faster rate of healing with NPWT when used in the inpatient setting. No studies were identified on the effectiveness of NPWT as a primary treatment for leg ulcers or for the use of NPWT in the outpatient setting. The evidence is insufficient to determine that the technology results in an improvement in the net health outcome.

For individuals who have lower-extremity ulcers due to venous insufficiency who receive portable, single-use outpatient NPWT, the evidence includes RCTs. Relevant outcomes are symptoms, change in disease status, morbid events, QOL, and treatment-related morbidity. A 2019 RCT compared the PICO device with standard NPWT. In this study, the PICO device demonstrated noninferiority for wound area reduction. No significant benefit in complete wound

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

closure was found in patients with venous ulcers. One study of the SNaP System showed noninferiority to a V.A.C. device for wound size reduction. A subgroup analysis of this study found a significant difference in complete wound closure for patients with venous ulcers. However, interpretation of this study is limited by a high loss to follow-up and lack of a control group treated with standard dressings. Well-designed comparative studies with larger numbers of patients powered to detect differences in complete wound closure are needed. The evidence is insufficient to determine that the technology results in an improvement in the net health outcome.

For individuals who have burn wounds who receive outpatient NPWT, the evidence includes RCTs, systematic reviews, and case series. Relevant outcomes are symptoms, change in disease status, morbid events, QOL, and treatment-related morbidity. An interim report of an RCT evaluating NPWT in partial-thickness burns, summarized in a Cochrane review, did not permit conclusions on the efficacy of NPWT for this indication. A separate RCT comparing NPWT with split-skin grafts in patients with full-thickness burns did not show differences in graft take and wound epithelialization. A retrospective case series reported good functional outcomes for most patients who were treated with NPWT at a single center. The evidence is insufficient to determine that the technology results in an improvement in the net health outcome.

For individuals who have traumatic or surgical wounds who receive NPWT, the evidence includes RCTs and systematic reviews. Relevant outcomes are symptoms, change in disease status, morbid events, QOL, and treatment-related morbidity. Systematic reviews of RCTs in patients with surgical wounds have generally found lower risk of SSI; however, many studies are limited to short-term use of NPWT limiting applicability to the outpatient setting. For patients with traumatic wounds, a Cochrane review failed to find significant improvement in patients treated with NPWT. The evidence is insufficient to determine that the technology results in an improvement in the net health outcome.

For individuals who have traumatic or surgical wounds who receive portable, single-use outpatient NPWT, the evidence includes RCTs. Relevant outcomes are symptoms, change in disease status, morbid events, QOL, and treatment-related morbidity. The PICO device was studied in an adequately powered but unblinded RCT of combined in- and outpatient use after total joint arthroplasty and 2 single-center RCTs of combined in- and outpatient use after cesarean delivery in women with obesity or other risk factors for poor wound healing. The evidence base for the Prevena System in the outpatient setting is not sufficiently robust for conclusions on efficacy to be drawn. Well-designed comparative studies with larger numbers of patients treated in an outpatient setting are needed. The evidence is insufficient to determine that the technology results in an improvement in the net health outcome.

Additional Information

Overall, the evidence from comparative clinical trials has demonstrated there is a subset of problematic wounds for which the use of NPWT may provide a significant clinical benefit. However, due to clinical variability and limited data, it is not possible to determine prospectively which wounds are most likely to respond favorably to NPWT. In addition, clinical input supports a therapeutic trial of NPWT for chronic pressure ulcers that have failed to heal, for traumatic or surgical wounds that have failed to close when there is exposed

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

bone, cartilage, tendon, or foreign material within the wound, and for nonhealing wounds in patients with underlying clinical conditions known to negatively impact wound healing. Therefore, a therapeutic trial of NPWT of not less than 14 days may be considered medically necessary for chronic wounds that have failed to heal, despite intense conventional wound therapy for at least 30 days, or for wounds of at least 30 days that have a high probability of failure to heal due to compounding factors involving the wound and the patient. For continued use of NPWT beyond 14 days to meet criteria for medical necessity, there must be objective evidence of wound healing, such as the development of healthy granulation tissue and progressive wound contracture.

DEFINITIONS

COMPREHENSIVE WOUND CARE PROGRAM includes a minimum of all the following general measures:

- Documentation in the patient’s medical record of evaluation, care, and wound measurements by a licensed medical professional; and
- Application of dressings to maintain a moist wound environment; and
- Debridement of necrotic tissue when present; and
- Evaluation of and provision for adequate nutritional and vascular status

GRANULATING TISSUE refers to formation of granule-like projections on the internal surface of the wound that represents the outgrowth of new capillaries, bringing a rich blood supply to the wound, promoting healing.

PRESSURE (DECUBITUS) ULCER is a type of wound that forms as a result of prolonged pressure against areas of the skin. This is commonly seen over the bony prominences, such as sacrum and heels, in bedridden and/or wheelchair confined individuals. Pressure ulcers are classified into four stages (and an unstageable category), to signify the degree of skin damage:

Stage I- Intact skin with non-blanchable redness of a localized area usually over a bony prominence. Darkly pigmented skin may not have visible blanching; its color may differ from the surrounding area.

Stage II- Partial thickness loss of dermis presenting as a shallow open ulcer with a red, pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.

Stage III- Full thickness tissue loss. Subcutaneous fat may be visible, but bone, tendon, or muscle is not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.

Stage IV- Full thickness tissue loss with exposed bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often include undermining and tunneling.

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

Unstageable- Full thickness tissue loss in which the base of the ulcer is covered by slough (yellow, tan, gray, green, or brown) and/or eschar (tan, brown or black) in the wound bed. (Until enough slough and/or eschar is removed to expose the base of the wound, the true depth, and therefore stage, cannot be determined.)

VASCULARITY is the state of blood vessel development and functioning in an organ or tissue.

DISCLAIMER

Capital Blue Cross' medical policies are used to determine coverage for specific medical technologies, procedures, equipment, and services. These medical policies do not constitute medical advice and are subject to change as permitted by law or applicable clinical evidence from independent treatment guidelines. Treating providers are solely responsible for medical advice and treatment of members. These policies are not a guarantee of coverage or payment. Payment of claims is subject to a determination regarding the member's benefit program and eligibility on the date of service, and a determination that the services are medically necessary and appropriate. Final processing of a claim is based upon the terms of contract that applies to the members' benefit program, including benefit limitations and exclusions. If a provider or a member has a question concerning this medical policy, please contact Capital Blue Cross' Provider Services or Member Services.

CODING INFORMATION

Note: This list of codes may not be all-inclusive, and codes are subject to change at any time. The identification of a code in this section does not denote coverage as coverage is determined by the terms of member benefit information. In addition, not all covered services are eligible for separate reimbursement.

Investigational; therefore, not covered:

Procedure Codes							
A9272	97607	97608					

Covered when medically necessary:

Procedure Codes							
A6550	A7000	A7001	E2402	K0743	K0744	K0745	K0746
97605	97606						

ICD-10-CM Diagnosis Code	Description
E08.621	Diabetes mellitus due to underlying condition with foot ulcer

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

E08.622	Diabetes mellitus due to underlying condition with other skin ulcer
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer
E10.621	Type 1 diabetes mellitus with foot ulcer
E10.622	Type 1 diabetes mellitus with other skin ulcer
E11.621	Type 2 diabetes mellitus with foot ulcer
E11.622	Type 2 diabetes mellitus with other skin ulcer
E11.A	Type 2 diabetes mellitus without complications in remission
E13.621	Other specified diabetes mellitus with foot ulcer
E13.622	Other specified diabetes mellitus with other skin ulcer
I70.231	Atherosclerosis of native arteries of right leg with ulceration of thigh
I70.232	Atherosclerosis of native arteries of right leg with ulceration of calf
I70.233	Atherosclerosis of native arteries of right leg with ulceration of ankle
I70.234	Atherosclerosis of native arteries of right leg with ulceration of heel and midfoot
I70.235	Atherosclerosis of native arteries of right leg with ulceration of other part of foot
I70.238	Atherosclerosis of native arteries of right leg with ulceration of other part of lower leg
I70.241	Atherosclerosis of native arteries of left leg with ulceration of thigh
I70.242	Atherosclerosis of native arteries of left leg with ulceration of calf
I70.243	Atherosclerosis of native arteries of left leg with ulceration of ankle
I70.244	Atherosclerosis of native arteries of left leg with ulceration of heel and midfoot
I70.245	Atherosclerosis of native arteries of left leg with ulceration of other part of foot
I70.248	Atherosclerosis of native arteries of left leg with ulceration of other part of lower leg
I70.25	Atherosclerosis of native arteries of other extremities with ulceration
I70.331	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of thigh
I70.332	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of calf
I70.333	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of ankle
I70.334	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.335	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of foot
I70.338	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.341	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of thigh

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

I70.342	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of calf
I70.343	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of ankle
I70.344	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.345	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of foot
I70.348	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.35	Atherosclerosis of unspecified type of bypass graft(s) of other extremity with ulceration
I70.431	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of thigh
I70.432	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of calf
I70.433	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of ankle
I70.434	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.435	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of foot
I70.438	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.441	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of thigh
I70.442	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of calf
I70.443	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of ankle
I70.444	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.445	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of foot
I70.448	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.45	Atherosclerosis of autologous vein bypass graft(s) of other extremity with ulceration
I70.531	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of thigh
I70.532	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of calf

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

I70.533	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of ankle
I70.534	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.535	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of foot
I70.538	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.541	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of thigh
I70.542	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of calf
I70.543	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of ankle
I70.544	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.545	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of foot
I70.548	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.55	Atherosclerosis of nonautologous biological bypass graft(s) of other extremity with ulceration
I70.631	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of thigh
I70.632	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of calf
I70.633	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of ankle
I70.634	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.635	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of foot
I70.638	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.641	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of thigh
I70.642	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of calf
I70.643	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of ankle
I70.644	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of heel and midfoot

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

170.645	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of foot
170.648	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of lower leg
170.65	Atherosclerosis of nonbiological bypass graft(s) of other extremity with ulceration
170.731	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of thigh
170.732	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of calf
170.733	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of ankle
170.734	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of heel and midfoot
170.735	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of foot
170.738	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of lower leg
170.741	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of thigh
170.742	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of calf
170.743	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of ankle
170.744	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of heel and midfoot
170.745	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of foot
170.748	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of lower leg
170.75	Atherosclerosis of other type of bypass graft(s) of other extremity with ulceration
183.011	Varicose veins of right lower extremity with ulcer of thigh
183.012	Varicose veins of right lower extremity with ulcer of calf
183.013	Varicose veins of right lower extremity with ulcer of ankle
183.014	Varicose veins of right lower extremity with ulcer of heel and midfoot
183.015	Varicose veins of right lower extremity with ulcer other part of foot
183.018	Varicose veins of right lower extremity with ulcer other part of lower leg
183.021	Varicose veins of left lower extremity with ulcer of thigh
183.022	Varicose veins of left lower extremity with ulcer of calf
183.023	Varicose veins of left lower extremity with ulcer of ankle
183.024	Varicose veins of left lower extremity with ulcer of heel and midfoot
183.025	Varicose veins of left lower extremity with ulcer other part of foot

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

I83.028	Varicose veins of left lower extremity with ulcer other part of lower leg
I83.211	Varicose veins of right lower extremity with both ulcer of thigh and inflammation
I83.212	Varicose veins of right lower extremity with both ulcer of calf and inflammation
I83.213	Varicose veins of right lower extremity with both ulcer of ankle and inflammation
I83.214	Varicose veins of right lower extremity with both ulcer of heel and midfoot and inflammation
I83.215	Varicose veins of right lower extremity with both ulcer of other part of foot and inflammation
I83.218	Varicose veins of right lower extremity with both ulcer of other part of lower extremity and inflammation
I83.221	Varicose veins of left lower extremity with both ulcer of thigh and inflammation
I83.222	Varicose veins of left lower extremity with both ulcer of calf and inflammation
I83.223	Varicose veins of left lower extremity with both ulcer of ankle and inflammation
I83.224	Varicose veins of left lower extremity with both ulcer of heel and midfoot and inflammation
I83.225	Varicose veins of left lower extremity with both ulcer of other part of foot and inflammation
I83.228	Varicose veins of left lower extremity with both ulcer of other part of lower extremity and inflammation
I87.311	Chronic venous hypertension (idiopathic) with ulcer of right lower extremity
I87.312	Chronic venous hypertension (idiopathic) with ulcer of left lower extremity
I87.313	Chronic venous hypertension (idiopathic) with ulcer of bilateral lower extremity
I87.331	Chronic venous hypertension (idiopathic) with ulcer and inflammation of right lower extremity
I87.332	Chronic venous hypertension (idiopathic) with ulcer and inflammation of left lower extremity
I87.333	Chronic venous hypertension (idiopathic) with ulcer and inflammation of bilateral lower extremity
L89.003	Pressure ulcer of unspecified elbow, stage 3
L89.004	Pressure ulcer of unspecified elbow, stage 4
L89.013	Pressure ulcer of right elbow, stage 3
L89.014	Pressure ulcer of right elbow, stage 4
L89.023	Pressure ulcer of left elbow, stage 3
L89.024	Pressure ulcer of left elbow, stage 4
L89.103	Pressure ulcer of unspecified part of back, stage 3
L89.104	Pressure ulcer of unspecified part of back, stage 4
L89.113	Pressure ulcer of right upper back, stage 3
L89.114	Pressure ulcer of right upper back, stage 4
L89.123	Pressure ulcer of left upper back, stage 3
L89.124	Pressure ulcer of left upper back, stage 4

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

L89.133	Pressure ulcer of right lower back, stage 3
L89.134	Pressure ulcer of right lower back, stage 4
L89.143	Pressure ulcer of left lower back, stage 3
L89.144	Pressure ulcer of left lower back, stage 4
L89.153	Pressure ulcer of sacral region, stage 3
L89.154	Pressure ulcer of sacral region, stage 4
L89.203	Pressure ulcer of unspecified hip, stage 3
L89.204	Pressure ulcer of unspecified hip, stage 4
L89.213	Pressure ulcer of right hip, stage 3
L89.214	Pressure ulcer of right hip, stage 4
L89.223	Pressure ulcer of left hip, stage 3
L89.224	Pressure ulcer of left hip, stage 4
L89.303	Pressure ulcer of unspecified buttock, stage 3
L89.304	Pressure ulcer of unspecified buttock, stage 4
L89.313	Pressure ulcer of right buttock, stage 3
L89.314	Pressure ulcer of right buttock, stage 4
L89.323	Pressure ulcer of left buttock, stage 3
L89.324	Pressure ulcer of left buttock, stage 4
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
L89.503	Pressure ulcer of unspecified ankle, stage 3
L89.504	Pressure ulcer of unspecified ankle, stage 4
L89.513	Pressure ulcer of right ankle, stage 3
L89.514	Pressure ulcer of right ankle, stage 4
L89.523	Pressure ulcer of left ankle, stage 3
L89.524	Pressure ulcer of left ankle, stage 4
L89.603	Pressure ulcer of unspecified heel, stage 3
L89.604	Pressure ulcer of unspecified heel, stage 4
L89.613	Pressure ulcer of right heel, stage 3
L89.614	Pressure ulcer of right heel, stage 4
L89.623	Pressure ulcer of left heel, stage 3
L89.624	Pressure ulcer of left heel, stage 4
L89.813	Pressure ulcer of head, stage 3
L89.814	Pressure ulcer of head, stage 4
L89.893	Pressure ulcer of other site, stage 3
L89.894	Pressure ulcer of other site, stage 4
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

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

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
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
L97.121	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
L97.211	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 necrosis
L97.218	Non-pressure chronic ulcer of right calf with other specified 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
L97.224	Non-pressure chronic ulcer of left calf with necrosis of bone
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
L97.311	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

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

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
L97.321	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
L97.411	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
L97.415	Non-pressure chronic ulcer of right heel and midfoot with muscle involvement without evidence of necrosis
L97.416	Non-pressure chronic ulcer of right heel and midfoot with bone involvement without evidence of necrosis
L97.418	Non-pressure chronic ulcer of right heel and midfoot with other specified 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
L97.425	Non-pressure chronic ulcer of left heel and midfoot with muscle involvement without evidence of necrosis
L97.426	Non-pressure chronic ulcer of left heel and midfoot with bone involvement without evidence of necrosis
L97.428	Non-pressure chronic ulcer of left heel and midfoot with other specified severity
L97.511	Non-pressure chronic ulcer of other part of right foot limited to breakdown of skin
L97.512	Non-pressure chronic ulcer of other part of right foot with fat layer exposed
L97.513	Non-pressure chronic ulcer of other part of right foot with necrosis of muscle
L97.514	Non-pressure chronic ulcer of other part of right foot with necrosis of bone
L97.515	Non-pressure chronic ulcer of other part of right foot with muscle involvement without evidence of necrosis
L97.516	Non-pressure chronic ulcer of other part of right foot with bone involvement without evidence of necrosis
L97.518	Non-pressure chronic ulcer of other part of right foot with other specified severity
L97.521	Non-pressure chronic ulcer of other part of left foot limited to breakdown of skin

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

L97.522	Non-pressure chronic ulcer of other part of left foot with fat layer exposed
L97.523	Non-pressure chronic ulcer of other part of left foot with necrosis of muscle
L97.524	Non-pressure chronic ulcer of other part of left foot with necrosis of bone
L97.525	Non-pressure chronic ulcer of other part of left foot with muscle involvement without evidence of necrosis
L97.526	Non-pressure chronic ulcer of other part of left foot with bone involvement without evidence of necrosis
L97.528	Non-pressure chronic ulcer of other part of left foot with other specified severity
L97.811	Non-pressure chronic ulcer of other part of right lower leg limited to breakdown of skin
L97.812	Non-pressure chronic ulcer of other part of right lower leg with fat layer exposed
L97.813	Non-pressure chronic ulcer of other part of right lower leg with necrosis of muscle
L97.814	Non-pressure chronic ulcer of other part of right lower leg with necrosis of bone
L97.815	Non-pressure chronic ulcer of other part of right lower leg with muscle involvement without evidence of necrosis
L97.816	Non-pressure chronic ulcer of other part of right lower leg with bone involvement without evidence of necrosis
L97.818	Non-pressure chronic ulcer of other part of right lower leg with other specified severity
L97.821	Non-pressure chronic ulcer of other part of left lower leg limited to breakdown of skin
L97.822	Non-pressure chronic ulcer of other part of left lower leg with fat layer exposed
L97.823	Non-pressure chronic ulcer of other part of left lower leg with necrosis of muscle
L97.824	Non-pressure chronic ulcer of other part of left lower leg with necrosis of bone
L97.825	Non-pressure chronic ulcer of other part of left lower leg with muscle involvement without evidence of necrosis
L97.826	Non-pressure chronic ulcer of other part of left lower leg with bone involvement without evidence of necrosis
L97.828	Non-pressure chronic ulcer of other part of left lower leg with other specified severity
L97.911	Non-pressure chronic ulcer of unspecified part of right lower leg limited to breakdown of skin
L97.912	Non-pressure chronic ulcer of unspecified part of right lower leg with fat layer exposed
L97.913	Non-pressure chronic ulcer of unspecified part of right lower leg with necrosis of muscle
L97.914	Non-pressure chronic ulcer of unspecified part of right lower leg with necrosis of bone
L97.915	Non-pressure chronic ulcer of unspecified part of right lower leg with muscle involvement without evidence of necrosis

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

L97.916	Non-pressure chronic ulcer of unspecified part of right lower leg with bone involvement without evidence of necrosis
L97.918	Non-pressure chronic ulcer of unspecified part of right lower leg with other specified 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 necrosis of muscle
L97.924	Non-pressure chronic ulcer of unspecified part of left lower leg with necrosis of bone
L97.925	Non-pressure chronic ulcer of unspecified part of left lower leg with muscle involvement without evidence of necrosis
L97.926	Non-pressure chronic ulcer of unspecified part of left lower leg with bone involvement without evidence of necrosis
L97.928	Non-pressure chronic ulcer of unspecified part of left lower leg with other specified 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
L98.415	Non-pressure chronic ulcer of buttock with muscle involvement without evidence of necrosis
L98.416	Non-pressure chronic ulcer of buttock with bone involvement without evidence of necrosis
L98.418	Non-pressure chronic ulcer of buttock with other specified 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
L98.425	Non-pressure chronic ulcer of back with muscle involvement without evidence of necrosis
L98.426	Non-pressure chronic ulcer of back with bone involvement without evidence of necrosis
L98.428	Non-pressure chronic ulcer of back with other specified severity
L98.43	Non-pressure chronic ulcer of abdomen
L98.44	Non-pressure chronic ulcer of chest
L98.45	Non-pressure chronic ulcer of neck
L98.46	Non-pressure chronic ulcer of face
L98.47	Non-pressure chronic ulcer of groin

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

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
L98.495	Non-pressure chronic ulcer of skin of other sites with muscle involvement without evidence of necrosis
L98.496	Non-pressure chronic ulcer of skin of other sites with bone involvement without evidence of necrosis
L98.498	Non-pressure chronic ulcer of skin of other sites with other specified severity
L98.A	Non-pressure chronic ulcer of upper limb, not elsewhere classified
L98.A1	Non-pressure chronic ulcer of upper arm
L98.A11	Non-pressure chronic ulcer of right upper arm
L98.A12	Non-pressure chronic ulcer of left upper arm
L98.A19	Non-pressure chronic ulcer of unspecified upper arm
L98.A2	Non-pressure chronic ulcer of forearm
L98.A21	Non-pressure chronic ulcer of right forearm
L98.A22	Non-pressure chronic ulcer of left forearm
L98.A29	Non-pressure chronic ulcer of unspecified forearm
L98.A3	Non-pressure chronic ulcer of hand
L98.A31	Non-pressure chronic ulcer of right hand
L98.A32	Non-pressure chronic ulcer of left hand
L98.A39	Non-pressure chronic ulcer of unspecified hand
S31.100D	Unspecified open wound of abdominal wall, right upper quadrant without penetration into peritoneal cavity, subsequent encounter
S31.100S	Unspecified open wound of abdominal wall, right upper quadrant without penetration into peritoneal cavity, sequela
S31.101D	Unspecified open wound of abdominal wall, left upper quadrant without penetration into peritoneal cavity, subsequent encounter
S31.101S	Unspecified open wound of abdominal wall, left upper quadrant without penetration into peritoneal cavity, sequela
S31.102D	Unspecified open wound of abdominal wall, epigastric region without penetration into peritoneal cavity, subsequent encounter
S31.102S	Unspecified open wound of abdominal wall, epigastric region without penetration into peritoneal cavity, sequela
S31.103D	Unspecified open wound of abdominal wall, right lower quadrant without penetration into peritoneal cavity, subsequent encounter
S31.103S	Unspecified open wound of abdominal wall, right lower quadrant without penetration into peritoneal cavity, sequela
S31.104D	Unspecified open wound of abdominal wall, left lower quadrant without penetration into peritoneal cavity, subsequent encounter

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

S31.104S	Unspecified open wound of abdominal wall, left lower quadrant without penetration into peritoneal cavity, sequela
S31.105D	Unspecified open wound of abdominal wall, periumbilic region without penetration into peritoneal cavity, subsequent encounter
S31.105S	Unspecified open wound of abdominal wall, periumbilic region without penetration into peritoneal cavity, sequela
S31.106A	Unspecified open wound of abdominal wall, right flank without penetration into peritoneal cavity, initial encounter
S31.106D	Unspecified open wound of abdominal wall, right flank without penetration into peritoneal cavity, subsequent encounter
S31.106S	Unspecified open wound of abdominal wall, right flank without penetration into peritoneal cavity, sequela
S31.107A	Unspecified open wound of abdominal wall, left flank without penetration into peritoneal cavity, initial encounter
S31.107D	Unspecified open wound of abdominal wall, left flank without penetration into peritoneal cavity, subsequent encounter
S31.107S	Unspecified open wound of abdominal wall, left flank without penetration into peritoneal cavity, sequela
S31.10AA	Unspecified open wound of abdominal wall, unspecified flank without penetration into peritoneal cavity, initial encounter
S31.10AD	Unspecified open wound of abdominal wall, unspecified flank without penetration into peritoneal cavity, subsequent encounter
S31.10AS	Unspecified open wound of abdominal wall, unspecified flank without penetration into peritoneal cavity, sequela
S31.116A	Laceration without foreign body of abdominal wall, right flank without penetration into peritoneal cavity, initial encounter
S31.116D	Laceration without foreign body of abdominal wall, right flank without penetration into peritoneal cavity, subsequent encounter
S31.116S	Laceration without foreign body of abdominal wall, right flank without penetration into peritoneal cavity, sequela
S31.117A	Laceration without foreign body of abdominal wall, left flank without penetration into peritoneal cavity, initial encounter
S31.117D	Laceration without foreign body of abdominal wall, left flank without penetration into peritoneal cavity, subsequent encounter
S31.117S	Laceration without foreign body of abdominal wall, left flank without penetration into peritoneal cavity, sequela
S31.11AA	Laceration without foreign body of abdominal wall, unspecified flank without penetration into peritoneal cavity, initial encounter
S31.11AD	Laceration without foreign body of abdominal wall, unspecified flank without penetration into peritoneal cavity, subsequent encounter
S31.11AS	Laceration without foreign body of abdominal wall, unspecified flank without penetration into peritoneal cavity, sequela

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

S31.126A	Laceration with foreign body of abdominal wall, right flank without penetration into peritoneal cavity, initial encounter
S31.126D	Laceration with foreign body of abdominal wall, right flank without penetration into peritoneal cavity, subsequent encounter
S31.126S	Laceration with foreign body of abdominal wall, right flank without penetration into peritoneal cavity, sequela
S31.127A	Laceration with foreign body of abdominal wall, left flank without penetration into peritoneal cavity, initial encounter
S31.127D	Laceration with foreign body of abdominal wall, left flank without penetration into peritoneal cavity, subsequent encounter
S31.127S	Laceration with foreign body of abdominal wall, left flank without penetration into peritoneal cavity, sequela
S31.12AA	Laceration with foreign body of abdominal wall unspecified flank without penetration into peritoneal cavity, initial encounter
S31.12AD	Laceration with foreign body of abdominal wall unspecified flank without penetration into peritoneal cavity, subsequent encounter
S31.12AS	Laceration with foreign body of abdominal wall unspecified flank without penetration into peritoneal cavity, sequela
S31.136A	Puncture wound of abdominal wall without foreign body, right flank without penetration into peritoneal cavity, initial encounter
S31.136D	Puncture wound of abdominal wall without foreign body, right flank without penetration into peritoneal cavity, subsequent encounter
S31.136S	Puncture wound of abdominal wall without foreign body, right flank without penetration into peritoneal cavity, sequela
S31.137A	Puncture wound of abdominal wall without foreign body, left flank without penetration into peritoneal cavity, initial encounter
S31.137D	Puncture wound of abdominal wall without foreign body, left flank without penetration into peritoneal cavity, subsequent encounter
S31.137S	Puncture wound of abdominal wall without foreign body, left flank without penetration into peritoneal cavity, sequela
S31.13AA	Puncture wound of abdominal wall without foreign body, unspecified flank without penetration into peritoneal cavity, initial encounter
S31.13AD	Puncture wound of abdominal wall without foreign body, unspecified flank without penetration into peritoneal cavity, subsequent encounter
S31.13AS	Puncture wound of abdominal wall without foreign body, unspecified flank without penetration into peritoneal cavity, sequela
S31.146A	Puncture wound of abdominal wall with foreign body, right flank without penetration into peritoneal cavity, initial encounter
S31.146D	Puncture wound of abdominal wall with foreign body, right flank without penetration into peritoneal cavity, subsequent encounter
S31.146S	Puncture wound of abdominal wall with foreign body, right flank without penetration into peritoneal cavity, sequela

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

S31.147A	Puncture wound of abdominal wall with foreign body, left flank without penetration into peritoneal cavity, initial encounter
T81.31XA	Disruption of external operation (surgical) wound, not elsewhere classified, initial encounter
T81.31XD	Disruption of external operation (surgical) wound, not elsewhere classified, subsequent encounter
T81.320A	Disruption or dehiscence of gastrointestinal tract anastomosis, repair, or closure, initial encounter
T81.320D	Disruption or dehiscence of gastrointestinal tract anastomosis, repair, or closure, subsequent encounter
T81.320S	Disruption or dehiscence of gastrointestinal tract anastomosis, repair, or closure, sequela
T81.321A	Disruption or dehiscence of closure of internal operation (surgical) wound of abdominal wall muscle or fascia, initial encounter
T81.321D	Disruption or dehiscence of closure of internal operation (surgical) wound of abdominal wall muscle or fascia, subsequent encounter
T81.321S	Disruption or dehiscence of closure of internal operation (surgical) wound of abdominal wall muscle or fascia, sequela
T81.328A	Disruption or dehiscence of closure of other specified internal operation (surgical) wound, initial encounter
T81.328D	Disruption or dehiscence of closure of other specified internal operation (surgical) wound, subsequent encounter
T81.328S	Disruption or dehiscence of closure of other specified internal operation (surgical) wound, sequela
T81.329A	Deep disruption or dehiscence of operation wound, unspecified, initial encounter
T81.329D	Deep disruption or dehiscence of operation wound, unspecified, subsequent encounter
T81.329S	Deep disruption or dehiscence of operation wound, unspecified, sequela
T81.33XA	Disruption of traumatic injury wound repair, initial encounter
T81.33XD	Disruption of traumatic injury wound repair, subsequent encounter
T81.42XA	Infection following a procedure, deep incisional surgical site, initial encounter
T81.42XD	Infection following a procedure, deep incisional surgical site, subsequent encounter
T81.49XA	Infection following a procedure, other surgical site, initial encounter
T81.49XD	Infection following a procedure, other surgical site, subsequent encounter

REFERENCES

1. U.S. Food and Drug Administration. *UPDATE on Serious Complications Associated with Negative Pressure Wound Therapy Systems: FDA Safety Communication. 2011 Feb*
2. Food and Drug Administration (FDA). *Guidance for Industry. Chronic Cutaneous Ulcer and Burn Wounds - Developing Products for Treatment. June 2006*

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

3. Rhee SM, Valle MF, Wilson LM, et al. *Negative Pressure Wound Therapy Technologies For Chronic Wound Care in the Home Setting. Evidence Report/Technology Assessment (Contract No. 290-201-200007-1) Rockville, MD: Agency for Healthcare Research and Quality; 2014.*
4. Rhee SM, Valle MF, Wilson LM, et al. *Negative pressure wound therapy technologies for chronic wound care in the home setting: A systematic review. Wound Repair Regen. 2015; 23(4): 506-17. PMID 25845268*
5. Sullivan N, Snyder DL, Tipton K, et al. *Technology assessment: Negative pressure wound therapy devices (Contract No. 290-2007-10063). Rockville, MD: Agency for Healthcare Research and Quality; 2009.*
6. Dumville JC, Hinchliffe RJ, Cullum N, et al. *Negative pressure wound therapy for treating foot wounds in people with diabetes mellitus. Cochrane Database Syst Rev. Oct 17 2013; (10): CD010318. PMID 24132761*
7. Liu Z, Dumville JC, Hinchliffe RJ, et al. *Negative pressure wound therapy for treating foot wounds in people with diabetes mellitus. Cochrane Database Syst Rev. Oct 17 2018; 10(10): CD010318. PMID 30328611*
8. Wynn M, Freeman S. *The efficacy of negative pressure wound therapy for diabetic foot ulcers: A systematised review. J Tissue Viability. Aug 2019; 28(3): 152-160. PMID 31056407*
9. Chen L, Zhang S, Da J, et al. *A systematic review and meta-analysis of efficacy and safety of negative pressure wound therapy in the treatment of diabetic foot ulcer. Ann Palliat Med. Oct 2021; 10(10): 10830-10839. PMID 34763444*
10. Kirsner R, Dove C, Reyzelman A, et al. *A prospective, randomized, controlled clinical trial on the efficacy of a single-use negative pressure wound therapy system, compared to traditional negative pressure wound therapy in the treatment of chronic ulcers of the lower extremities. Wound Repair Regen. Sep 2019; 27(5): 519-529. PMID 31087729*
11. Kirsner RS, Zimnitsky D, Robinson M. *A prospective, randomized, controlled clinical study on the effectiveness of a single-use negative pressure wound therapy system, compared to traditional negative pressure wound therapy in the treatment of diabetic ulcers of the lower extremities. Wound Repair Regen. Nov 2021; 29(6): 908-911. PMID 34525239*
12. Armstrong DG, Marston WA, Reyzelman AM, et al. *Comparison of negative pressure wound therapy with an ultraportable mechanically powered device vs. traditional electrically powered device for the treatment of chronic lower extremity ulcers: a multicenter randomized-controlled trial. Wound Repair Regen. 2011; 19(2): 173-80. PMID 21362084*
13. Armstrong DG, Marston WA, Reyzelman AM, et al. *Comparative effectiveness of mechanically and electrically powered negative pressure wound therapy devices: a multicenter randomized controlled trial. Wound Repair Regen. 2012; 20(3): 332-41. PMID 22564228*
14. Lerman B, Oldenbrook L, Eichstadt SL, et al. *Evaluation of chronic wound treatment with the SNaP wound care system versus modern dressing protocols. Plast Reconstr Surg. Oct 2010; 126(4): 1253-1261. PMID 20885246*
15. Shi J, Gao Y, Tian J, et al. *Negative pressure wound therapy for treating pressure ulcers. Cochrane Database Syst Rev. May 26 2023; 5(5): CD011334. PMID 37232410*

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

16. Wanner MB, Schwarzl F, Strub B, et al. Vacuum-assisted wound closure for cheaper and more comfortable healing of pressure sores: a prospective study. *Scand J Plast Reconstr Surg Hand Surg.* 2003; 37(1): 28-33. PMID 12625392
17. Dumville JC, Land L, Evans D, et al. Negative pressure wound therapy for treating leg ulcers. *Cochrane Database Syst Rev.* Jul 14 2015; 2015(7): CD011354. PMID 26171910
18. Vuerstaek JD, Vainas T, Wuite J, et al. State-of-the-art treatment of chronic leg ulcers: A randomized controlled trial comparing vacuum-assisted closure (V.A.C.) with modern wound dressings. *J Vasc Surg.* Nov 2006; 44(5): 1029-37; discussion 1038. PMID 17000077
19. Marston WA, Armstrong DG, Reyzelman AM, et al. A Multicenter Randomized Controlled Trial Comparing Treatment of Venous Leg Ulcers Using Mechanically Versus Electrically Powered Negative Pressure Wound Therapy. *Adv Wound Care (New Rochelle).* Feb 01 2015; 4(2): 75-82. PMID 25713749
20. Lou J, Zhu X, Xiang Z, et al. The efficacy and safety of negative pressure wound therapy in paediatric burns: a systematic review and meta-analysis of randomized controlled trials. *BMC Pediatr.* Dec 18 2024; 24(1): 807. PMID 39696096
21. Dumville JC, Munson C, Christie J. Negative pressure wound therapy for partial-thickness burns. *Cochrane Database Syst Rev.* Dec 15 2014; 2014(12): CD006215. PMID 25500895
22. Bloemen MC, van der Wal MB, Verhaegen PD, et al. Clinical effectiveness of dermal substitution in burns by topical negative pressure: a multicenter randomized controlled trial. *Wound Repair Regen.* 2012; 20(6): 797-805. PMID 23110478
23. Krug E, Berg L, Lee C, et al. Evidence-based recommendations for the use of Negative Pressure Wound Therapy in traumatic wounds and reconstructive surgery: steps towards an international consensus. *Injury.* Feb 2011; 42 Suppl 1: S1-12. PMID 21316515
24. Ehrl D, Heidekrueger PI, Broer PN, et al. Topical Negative Pressure Wound Therapy of Burned Hands: Functional Outcomes. *J Burn Care Res.* Jan 01 2018; 39(1): 121-128. PMID 28368916
25. Norman G, Shi C, Goh EL, et al. Negative pressure wound therapy for surgical wounds healing by primary closure. *Cochrane Database Syst Rev.* Apr 26 2022; 4(4): CD009261. PMID 35471497
26. Li HZ, Xu XH, Wang DW, et al. Negative pressure wound therapy for surgical site infections: a systematic review and meta-analysis of randomized controlled trials. *Clin Microbiol Infect.* Nov 2019; 25(11): 1328-1338. PMID 31220604
27. De Vries FEE, Wallert ED, Solomkin JS, et al. A systematic review and meta-analysis including GRADE qualification of the risk of surgical site infections after prophylactic negative pressure wound therapy compared with conventional dressings in clean and contaminated surgery. *Medicine (Baltimore).* Sep 2016; 95(36): e4673. PMID 27603360
28. Iheozor-Ejiogor Z, Newton K, Dumville JC, et al. Negative pressure wound therapy for open traumatic wounds. *Cochrane Database Syst Rev.* Jul 03 2018; 7(7): CD012522. PMID 29969521
29. Stannard JP, Volgas DA, McGwin G, et al. Incisional negative pressure wound therapy after high-risk lower extremity fractures. *J Orthop Trauma.* Jan 2012; 26(1): 37-42. PMID 21804414

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

30. Costa ML, Achten J, Bruce J, et al. Effect of Negative Pressure Wound Therapy vs Standard Wound Management on 12-Month Disability Among Adults With Severe Open Fracture of the Lower Limb: The WOLLF Randomized Clinical Trial. *JAMA*. Jun 12 2018; 319(22): 2280-2288. PMID 29896626
31. Seidel D, Diedrich S, Herrle F, et al. Negative Pressure Wound Therapy vs Conventional Wound Treatment in Subcutaneous Abdominal Wound Healing Impairment: The SAWHI Randomized Clinical Trial. *JAMA Surg*. Jun 01 2020; 155(6): 469-478. PMID 32293657
32. Stannard JP, Robinson JT, Anderson ER, et al. Negative pressure wound therapy to treat hematomas and surgical incisions following high-energy trauma. *J Trauma*. Jun 2006; 60(6): 1301-6. PMID 16766975
33. Monsen C, Acosta S, Mani K, et al. A randomised study of NPWT closure versus alginate dressings in peri-vascular groin infections: quality of life, pain and cost. *J Wound Care*. Jun 2015; 24(6): 252, 254-6, 258-0. PMID 26075373
34. Costa ML, Achten J, Parsons NR. Five-year outcomes for patients sustaining severe fractures of the lower limb : mid-term results from the Wound management for Open Lower Limb Fracture (WOLLF) trial. *Bone Joint J*. May 2022; 104-B(5): 633-639. PMID 35491582
35. Seidel D, Lefering R. NPWT Resource Use Compared With Conventional Wound Treatment in Subcutaneous Abdominal Wounds With Healing Impairment After Surgery: SAWHI Randomized Clinical Trial Results. *Ann Surg*. Feb 01 2022; 275(2): e290-e298. PMID 34117147
36. Karlakki SL, Hamad AK, Whittall C, et al. Incisional negative pressure wound therapy dressings (iNPWTd) in routine primary hip and knee arthroplasties: A randomised controlled trial. *Bone Joint Res*. Aug 2016; 5(8): 328-37. PMID 27496913
37. Peterson AT, Bakaysa SL, Driscoll JM, et al. Randomized controlled trial of single-use negative-pressure wound therapy dressings in morbidly obese patients undergoing cesarean delivery. *Am J Obstet Gynecol MFM*. Sep 2021; 3(5): 100410. PMID 34058423
38. Gonzalez MG, Barske ME, Kjellsson KB, et al. Topical negative pressure wound therapy to prevent wound complications following caesarean delivery in high-risk obstetric patients: A randomised controlled trial. *Aust N Z J Obstet Gynaecol*. Aug 2023; 63(4): 516-520. PMID 37140175
39. Pauser J, Nordmeyer M, Biber R, et al. Incisional negative pressure wound therapy after hemiarthroplasty for femoral neck fractures - reduction of wound complications. *Int Wound J*. Oct 2016; 13(5): 663-7. PMID 25125244
40. Murphy PB, Knowles S, Chadi SA, et al. Negative Pressure Wound Therapy Use to Decrease Surgical Nosocomial Events in Colorectal Resections (NEPTUNE): A Randomized Controlled Trial. *Ann Surg*. Jul 2019; 270(1): 38-42. PMID 30499799
41. Hussamy DJ, Wortman AC, McIntire DD, et al. Closed Incision Negative Pressure Therapy in Morbidly Obese Women Undergoing Cesarean Delivery: A Randomized Controlled Trial. *Obstet Gynecol*. Oct 2019; 134(4): 781-789. PMID 31503147
42. Tuuli MG, Liu J, Tita ATN, et al. Effect of Prophylactic Negative Pressure Wound Therapy vs Standard Wound Dressing on Surgical-Site Infection in Obese Women After Cesarean Delivery: A Randomized Clinical Trial. *JAMA*. Sep 22 2020; 324(12): 1180-1189. PMID 32960242

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

43. Bertges DJ, Smith L, Scully RE, et al. A multicenter, prospective randomized trial of negative pressure wound therapy for infrainguinal revascularization with a groin incision. *J Vasc Surg.* Jul 2021; 74(1): 257-267.e1. PMID 33548422
44. Ceppa EP, Kim RC, Niedzwiecki D, et al. Closed Incision Negative Pressure Therapy to Reduce Surgical Site Infection in High-Risk Gastrointestinal Surgery: A Randomized Controlled Trial. *J Am Coll Surg.* Apr 01 2023; 236(4): 698-708. PMID 36728375
45. American Academy of Orthopaedic Surgeons. *Prevention of Surgical Site Infections After Major Extremity Trauma Evidence-Based Clinical Practice Guideline.* Published 3/21/22
46. Qaseem A, Humphrey LL, Forciea MA, et al. Treatment of pressure ulcers: a clinical practice guideline from the American College of Physicians. *Ann Intern Med.* Mar 03 2015; 162(5): 370-9. PMID 25732279
47. Association for the Advancement of Wound Care (AAWC). *International Consolidated Venous Ulcer Guideline (ICVUG). Update of AAWC Venous Ulcer Guideline, 2005 and 2010.* 2015
<https://aawconline.memberclicks.net/assets/appendix%20c%20guideline%20icvug-textformatrecommendations-final%20v42%20changessaved18aug17.pdf>. Accessed November 13, 2025
48. Willy C, Agarwal A, Andersen CA, et al. Closed incision negative pressure therapy: international multidisciplinary consensus recommendations. *Int Wound J.* Apr 2017; 14(2): 385-398. PMID 27170231
49. Senneville É, Albalawi Z, van Asten SA, et al. IWGDF/IDSA guidelines on the diagnosis and treatment of diabetes-related foot infections (IWGDF/IDSA 2023). *Diabetes Metab Res Rev.* Oct 01 2023: e3687. PMID 37779323
50. Lou J, Zhu X, Xiang Z, et al. The efficacy and safety of negative pressure wound therapy in paediatric burns: a systematic review and meta-analysis of randomized controlled trials. *BMC Pediatr.* Dec 18 2024; 24(1): 807. PMID 39696096
51. National Institute for Health and Care Excellence (NICE). *Negative Pressure Wound Therapy for the Open Abdomen [IPG467].* 2013
52. National Institute for Health and Care Excellence (NICE). *Diabetic Foot Problems: Prevention and Management [NG19].* 2019
53. National Institute for Health and Care Excellence (NICE). *Pressure ulcers: prevention and management [CG179].* 2014
54. National Institute for Health and Care Excellence (NICE). *PICO negative pressure wound dressings for closed surgical incisions [MTG43].* 2019
55. National Institute for Health and Care Excellence (NICE). *Cesarean birth [NG192].* 2023
56. National Institute for Health and Care Excellence (NICE). *The VAC Veraflo Therapy system for acute infected or chronic wounds that are failing to heal [MTG54].* 2021.

POLICY HISTORY

MP 4.004	04/23/2020 Consensus Review. Policy statements remain unchanged.
	02/12/2021 Minor Review. Changed frequency of monitoring from every 14 days to monthly. Took out Length of Coverage Section. Deleted Policy Guidelines. Updated cross-references. No changes to coding. Updated references.

MEDICAL POLICY

POLICY TITLE	NEGATIVE PRESSURE WOUND THERAPY IN THE OUTPATIENT SETTING
POLICY NUMBER	MP 4.004

	03/07/2022 Consensus Review. Summary of Evidence updated, FEP and references updated. No changes to policy statement.
	02/15/2023 Consensus Review. Updated description/background, coding table, and references.
	03/27/2024 Consensus Review. Updated cross references, background, rationale, and references. No changes to coding.
	08/15/2024 Administrative Update. Added/deleted ICD-10 codes from New Code Process. Eff date 10/01/2024
	03/06/2025 Minor Review. Updated criteria including but not limited to single use devices are now INV and chronic being defined in this policy as greater than 90 days. Procedure codes 97607 and 97608 have been moved to INV coding table.
	06/16/2025 Administrative Update. Removed Benefit Variations Section and updated Disclaimer.
	09/03/2025 Administrative Update. Added ICD-10 codes from New Code Process. Eff date 10/01/2025
	02/26/2026 Consensus Review. Updated references. No changes to coding.

Health care benefit programs issued or administered by Capital Blue Cross and/or its subsidiaries, Capital Advantage Insurance Company[®], Capital Advantage Assurance Company[®], and Keystone Health Plan[®] Central. Independent licensees of the Blue Cross BlueShield Association. Communications issued by Capital Blue Cross in its capacity as administrator of programs and provider relations for all companies.