PRISM
HOME MEDICAL SUPPLY SPECIALISTS

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Dear Valued Client,

PRISM has received numerous inquiries in regard to wound care (surgical dressing) supply documentation requirements for patients effected by novel coronavirus (COVID-19); particularly patients who are restricted from visiting their provider/clinic because:

- they have been deemed by the CDC at a "higher risk" of contracting COVID-19 (e.g. older adults and people who have serious chronic medical conditions),
- they are exhibiting symptoms associated with COVID-19,
- they have been exposed to others with COVID-19,
- they have travel restrictions due to;
    - previous travel in a "high risk" area with sustained community transmission (e.g. China, Iran, Italy, etc.) of COVID-19,
    - loss of transportation due to a relied upon resource (e.g. caregiver) being effected by COVID-19, or
    - they are caring for others (e.g. spouse, child, grandchild, etc.) effected by COVID-19.

Though CMS and HHS have not provided any specific guidance for surgical dressings, Local Coverage Article: Surgical Dressing Policy Article (A54563) addresses proper documentation of the patient's medical record when provider/clinical access is restricted, stating:

*Monthly evaluation of the beneficiary's wound(s) is required **unless** there is documentation in the medical record which justifies why an evaluation could not be done within this timeframe **and** what other monitoring methods were used to evaluate the beneficiary's need for ongoing use of dressings.*

PLEASE NOTE, for existing patients this is a two part test. Many providers are not accustom to documenting why a patient is having difficulty accessing their provider/clinic. However, this **must** be documented if you want your patients to continue to have access to their surgical dressing benefits. Furthermore, "other monitoring methods" (e.g. telephone conversation with patient or patient's caregiver) assessing the following areas **must** also be documented in the patient's medical record in order to establish need for ongoing use of dressings;

- wound(s) that were previously prescribed dressing(s) are still active (attempt to document wound size and drainage if this information can be determined),
- the patient is continuing to use previously prescribed dressing(s) as instructed by the prescribing practitioner,
- the patient is at or near exhaustion of supplies,
- document any recommended changes to frequency of use and/or duration of need, and
- link the obtained information from the patient/patient's caregiver to the most recent wound evaluation you have on file (see details of wound evaluation below).

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Furthermore, for existing patients and new patients seen in clinic or via regulatory authorized telemedicine, a wound evaluation containing **all** of the following areas must be present in the patient's medical record in order to establish access and/or have continued access to a patient's surgical dressing benefit.

- The type of qualifying wound,
- Information regarding the number of qualifying wounds being treated with a dressing,
- Whether the dressing is being used as a primary or secondary dressing,
- The size of the dressing (if applicable),
- The number/amount to be used at one time,
- The frequency of dressing change,
- The duration of need,
- Wound(s) location,
- Wound size (length x width) and depth,
- Amount of drainage, and
- Wound thickness (e.g. full or partial) or equivalent (e.g. staging or grading).

Lastly, regulatory matters restricting access to your patient's benefits are complex. PRISM takes pride in being regulatory experts and providing resources to our customers on matters such as these. This being said, the circumstances surrounding COVID-19 are fluid. We will do our best to provide any timely updates regarding changes to the information provided. We will also attempt to limit our access and communication with your office or clinic and your patients to only the most necessary interaction needed for service.

Warm Regards,

President
Prism Medical Products, L.L.C