



2026 DRESSING COMPLIANCE GUIDE

Surgical Incisions / Chronic Wounds

OVERVIEW



RECOVERY GPS (Guided Practice Success) **Compliance Overview:**

Using the right surgical dressings is essential for promoting healing, preventing infections, and ensuring positive patient outcomes. Following compliance guidelines not only enhances patient care but also optimizes insurance reimbursement and minimizes denials. This guide is designed to help you navigate surgical dressing compliance requirements, streamline documentation, and ensure adherence to CMS (Centers for Medicare & Medicaid Services) and LCD (Local Coverage Determinations) standards.

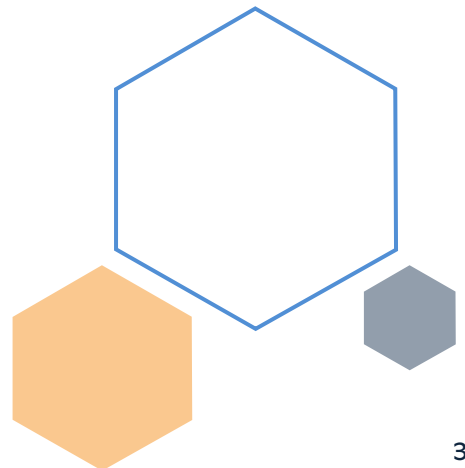
SURGICAL DRESSING COMPLIANCE **GUIDE for SURGICAL INCISIONS &** **CHRONIC WOUNDS**



This guide provides an extensive overview of compliance requirements for the use of surgical dressings in chronic wounds and surgical incisions, with a focus on adhering to CMS (Centers for Medicare & Medicaid Services) guidelines, specifically Policy A54563 and Local Coverage Determination (LCD) L33831, as well as the dropshipping process under DME CMS guidelines A55426.

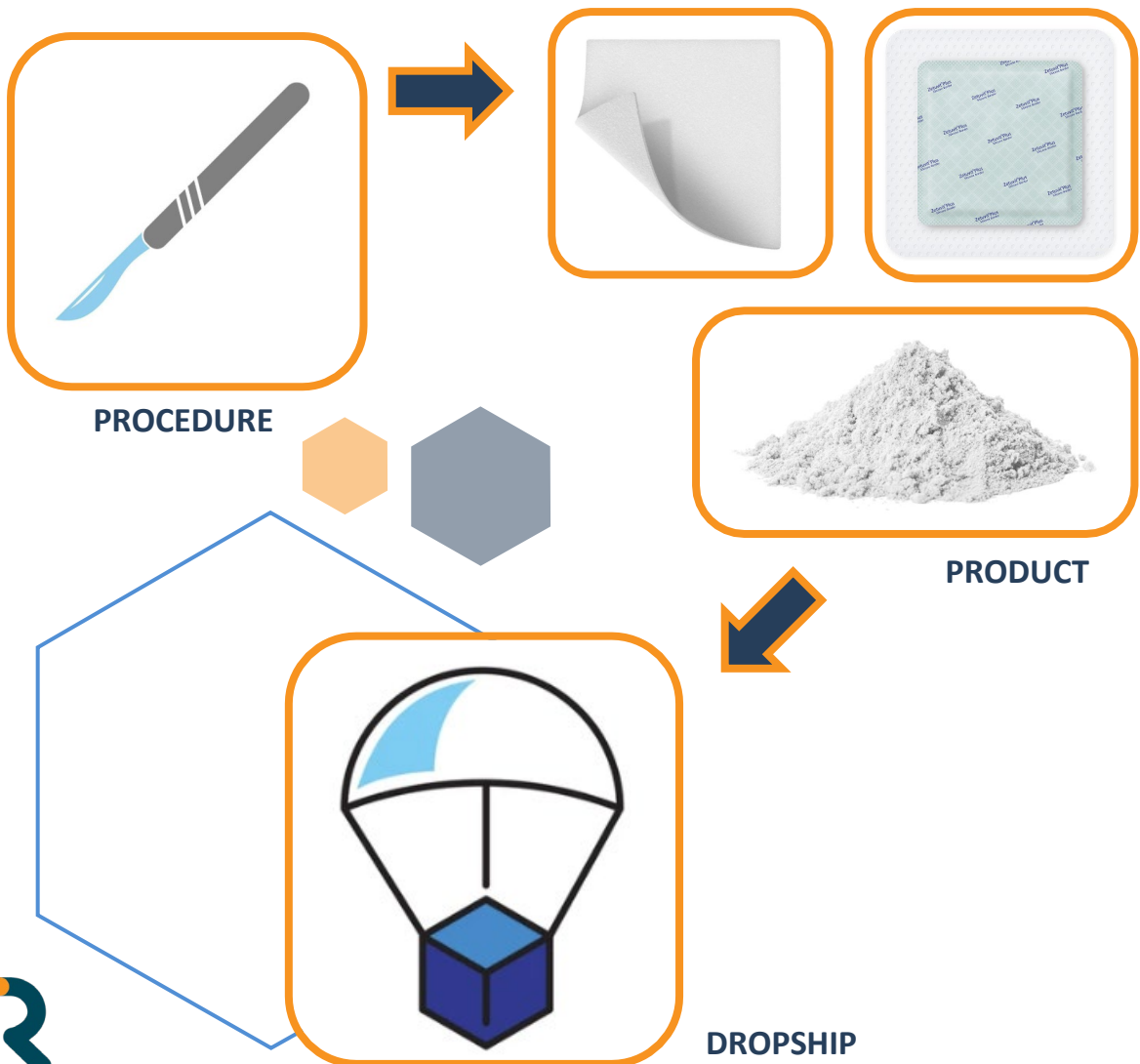
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INTRODUCTION TO SURGICAL DRESSING COMPLIANCE

Surgical dressings play a vital role in promoting healing, preventing infection, and ensuring successful patient outcomes. Compliance with CMS policies and LCD guidelines is essential not only for optimal patient care but also for ensuring proper reimbursement and avoiding claims denials. This guide focuses on the appropriate use of surgical dressings for surgical incisions and chronic wounds, as well as the regulations surrounding the delivery of these dressings directly to patients' homes.



QUALIFYING WOUNDS & REQUIREMENTS

- Surgical Dressing Policy A54563



QUALIFYING WOUND Surgical dressings are covered when a qualifying wound is present. A qualifying wound is defined as either of the following:

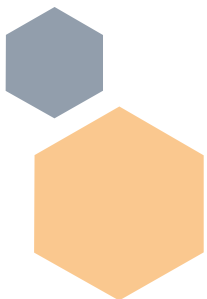
- A wound caused by, or treated by, a surgical procedure; or,
- A wound that requires debridement, regardless of the debridement technique.

QUALIFYING DRESSING REQUIREMENTS Products that are eligible to be classified as a surgical dressing include both:

1. **Primary dressings** – Defined as therapeutic or protective coverings applied directly to wounds or lesions either on the skin or caused by an opening to the skin; and,
2. **Secondary dressings** – Defined as materials that serve a therapeutic or protective function and that are needed to secure a primary dressing.

Indications for Use: Post-surgery sites, post-operative wounds, diabetic ulcers, pressure ulcers, venous ulcers and lacerations.

If a physician applies surgical dressings as part of a professional service that is billed to Medicare, the surgical dressings are considered incident to the professional services of the health care practitioner and are not separately payable. Claims for these dressings must not be submitted. Claims for the professional service, which includes the dressings, must be submitted to the local carrier or intermediary. If dressing changes are sent home with the beneficiary, claims for these dressings may be submitted. In this situation, use the place of service corresponding to the beneficiary's residence; **Place of Service Office (POS=11) must not be used.**
PLACE OF SERVICE (POS 12) MUST BE USED.



ELIGIBLE DRESSINGS – LOCAL DETERMINATION (LCD) L33831

- **Primary Dressing:** Used directly on the wound bed (Collagen, Alginates, etc.)
- **Secondary Dressing:** Secure primary dressings. (SAP, Silicone, Adhesive, etc.)
- **Reimbursement Criteria:** CMS reimburses only for dressings that are supported by sufficient clinical evidence demonstrating their effectiveness and necessity.



Collagen Dressing (A6011, A6021-A6024)

A collagen-based dressing is covered for **full thickness wounds** (e.g., stage 3 or 4 ulcers), wounds with **light to moderate exudate**, or wounds that have stalled or have not progressed toward a healing goal. They can stay in place up to 7 days. Collagen based dressings are not covered for wounds with heavy exudate, third-degree burns, or when an active vasculitis is present.



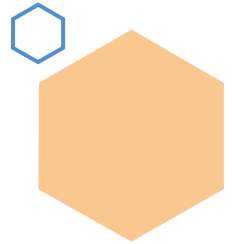
ELIGIBLE DRESSINGS – LOCAL DETERMINATION (LCD) L33831 (cont.)

Dressing Size: Key Compliance Guideline to Ensure Proper Dressing Size

By selecting the correct size and type of dressings, you not only improve patient outcomes but also streamline the billing process, reducing the risk of denials due to non-compliant dressing usage.

Proper documentation is the cornerstone of compliance for surgical dressings. Accurate records not only support patient care but also justify medical necessity for insurance reimbursement.

- **Dressings should be no more than 2 inches larger than the wound's dimensions.** This ensures optimal coverage without exceeding CMS guidelines for medical necessity.



QR In-Home Wound Protocol provides a variety of primary and secondary dressings that fully comply with CMS standards.

CMS: Surgical dressings must be tailored to the specific needs of an individual beneficiary. When surgical dressings are provided in kits, only those components of the kit that meet the definition of a surgical dressing, that are ordered by the treating practitioner, and that are reasonable and necessary are covered.

CMS REQUIREMENTS for DROP-SHIPPING SURGICAL DRESSINGS via DME (A55246)

Under CMS guidelines A55426, durable medical equipment (DME) suppliers may provide surgical dressings via direct drop-shipping to the patient's home. This process allows patients to receive the necessary dressings and supplies without having to visit a clinic or office, thus improving convenience and ensuring timely care.



DME Requirements for Surgical Dressings:

Suppliers must ensure that the dressings are medically necessary, appropriately documented, and compliant with the CMS guidelines. The use of DME for drop-shipping includes:

- Verification of patient eligibility and insurance benefits.
- Documentation of wound type, severity, and dressing requirements.
- Proper coding and billing procedures in compliance with Medicare's guidelines.

Supply Delivery Process:

- Once the order is verified and processed, surgical dressings are shipped directly to the patient's home. This helps reduce hospital visits and improves patient compliance.
- The delivery of supplies must be timely and consistent, with accurate tracking information available to both the patient and the healthcare provider.



CMS REQUIREMENTS for DROP-SHIPPING SURGICAL DRESSINGS via DME (A55246) (cont.)



Proof of Delivery Signature:

Delivery via Shipping or Delivery Service Directly to a Beneficiary –

If the supplier uses a shipping service or mail order, the proof of delivery (POD) documentation must provide a complete record tracking the item(s) from the DMEPOS supplier to the beneficiary. An example of acceptable documentation would include the shipping invoice and the **delivery service's tracking information**. The supplier's record must be clearly linked to the delivery service record through an identifiable method, such as the delivery service's package ID number or the supplier's invoice number for the package sent to the beneficiary.

Date of Service Methods:

If a supplier utilizes a shipping service or mail order, suppliers have two options for the DOS to use on the claim:

1. Suppliers may use the shipping date as the DOS. The shipping date is defined as the date the delivery/shipping service label is created or the date the item is retrieved by the shipping service for delivery. However, such dates should not demonstrate significant variation.
2. Suppliers may use the date of delivery as the DOS on the claim.



QR's Portal supplies a personalized POD tailored to the practices protocol to ensure compliance.



OPTIMIZING DOCUMENTATION and COMPLIANCE

Proper documentation is critical for ensuring that claims for surgical dressings are approved and reimbursed. Healthcare providers must maintain accurate and thorough records, including:

- **Detailed Patient Information:** Including medical history, wound type, and stage of healing.
- **Wound Assessments:** Document wound measurements (length, width, depth), presence of infection, and exudate levels.
- **Treatment Plan:** A clear plan outlining the type of dressings used, frequency of changes, and progress toward healing.
- **Reevaluation Notes:** If the wound is not progressing, document adjustments to the treatment plan and provide justification for continued dressing use.
- **Supplies Used:** List the exact dressings provided, with descriptions, quantities, and dates of delivery.



OPTIMIZING DOCUMENTATION and COMPLIANCE (cont.)

Requirements:

- **Standard Written Order:** Include full patient information, insurance details, general description of the item, quantity of the item, and practitioner's name and signature.
- **Additional Support:** Document frequency of change, route of administration, and duration of need.
- **Qualifying Wound Specifications:** Type of wound
- Location, number, and size of qualifying wounds being treated Primary and secondary dressing designation
 - Amount of drainage
 - Type of dressing Size of dressing
 - Number and amount used at one time
 - Frequency of dressing change
- **Physician Orders:** Ensure all treatments are prescribed by a qualified healthcare provider.
- **Delivery Documentation:** Supply the proof of delivery to the patient's address.

QR's onboarding Team will collaborate with the practice to establish compliant documentation tailored to each patient's specific needs.



PROPER TIMING

These guidelines optimize processes and ensure the delivery of compliant, efficient care.

Pre-Procedure:

- **Verification Requests:** Ensure all verification details are submitted and approved for the procedure.
- **Prior Authorization:** Confirm authorization for the procedure and supplies before moving forward.

Post-Procedure:

- **Outpatient Procedures:** Place orders after the procedure is complete and the patient is discharged. Date of service for surgical dressing DME cannot fall on the same day of the procedure.
- **Home Health:** Orders must be shipped prior to the home health provider's arrival at the patient's home to prevent bundling of charges.
- **Home Physical Therapy:** Orders must be shipped prior to the home health PT provider's arrival at the patient's home to prevent bundling of charges. (Outpatient PT is excluded and does not affect DME services)
- **Skilled Nursing:** Orders must be shipped after the patient has been discharged from the SNF. DME cannot be dispensed while the patient is under short term care.
- **Long Term Nursing Facility:** Orders may be placed and fulfilled for long term residence as long the provider meets the CMS criteria for DME suppliers and billing.

QR's HIPAA-Compliant Portal collaborates with the practice to streamline workflows, ensuring timely and compliant order processing.



KEY CONSIDERATIONS for SURGICAL DRESSING COMPLIANCE



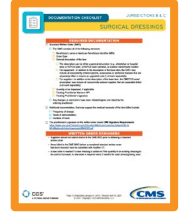
- **Frequency of Dressing Changes:** Ensure that documentation supports the frequency of dressing changes. For example, dressings that are highly absorbent or specialized (like collagen dressings) may require more frequent changes based on wound exudate levels, i.e. daily application.
- **Patient Education:** Provide patients with clear instructions on how to use the dressings and manage their wound care at home. This improves compliance and reduces the risk of infection.
- **Claims Submission:** Use the correct ICD-10 and HCPCS codes for each type of dressing and ensure that all relevant information is included in the claims submitted to Medicare.
- **Monitoring Progress:** Regular follow-up assessments are necessary to ensure that the chosen dressings are appropriate and that the wound is progressing as expected.

To ensure the success of an in-home wound protocol, it's essential to educate patients, and we provide a variety of educational tools, such as brochures, video cards, QR code links, and more, to support the practice in this process.



CMS COMPLIANCE REFERENCES

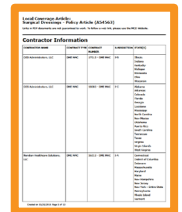
Surgical Dressing Checklist



CMS Policy A54563

Outlines the requirements for the reimbursement of surgical dressings for Medicare beneficiaries. This policy addresses both the type of dressings that qualify for coverage and the conditions under which they may be covered, as well as documentation and procedural requirements for healthcare providers.

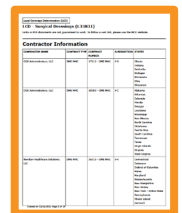
[A54563 LINK](#)



LCD L33831

Outlines the Medicare coverage criteria for surgical dressings used in the treatment of post-surgical and chronic wounds requiring documentation of medical necessity and proper wound assessment. It specifies the types of dressings that may be covered, the frequency of dressing changes, and the need for clear and detailed records to ensure compliance and reimbursement.

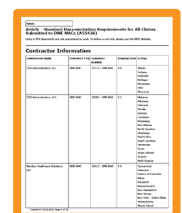
[L33831 LINK](#)



CMS Policy A55426

Durable medical equipment (DME) suppliers may provide surgical dressings via direct drop-shipping to the patient's home. This process allows patients to receive the necessary dressings and supplies without having to visit a clinic or office, thus improving convenience and ensuring timely care.

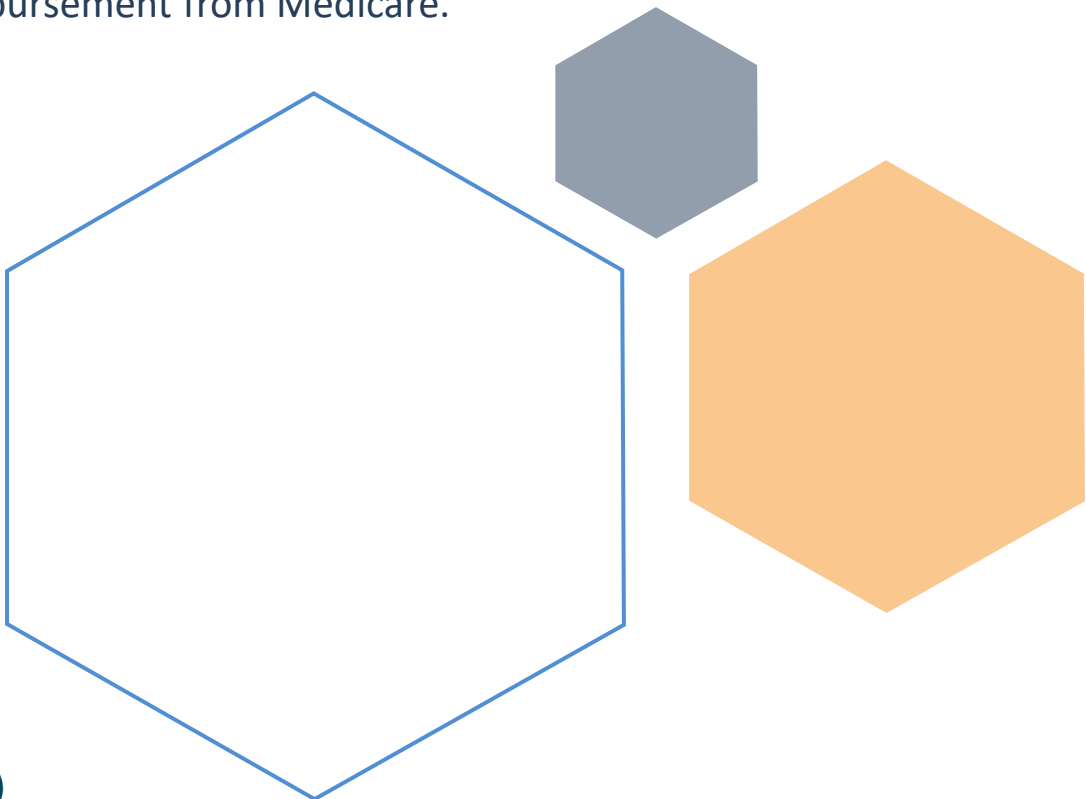
[A55426 LINK](#)



QR's COMPLIANCE MISSION

Adhering to CMS policy A54563, LCD L33831, and DME requirements A55426 for surgical dressing coverage ensures that both the patient and healthcare provider are meeting necessary guidelines for wound care. Drop-shipping surgical dressings directly to patients' homes not only improves convenience but also enhances patient compliance and reduces the risk of complications, ultimately leading to better healing outcomes.

By maintaining accurate documentation, following compliance guidelines, and providing appropriate resources for both patients and providers, you can optimize care for chronic wounds and surgical incisions while ensuring proper reimbursement from Medicare.





THANK YOU

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