

Coverage Criteria for a Group 1 Support Surface: Foam Mattress/ Alternating Pressure Pad

To be eligible for reimbursement by the patient's insurance, at least one of the following requirements must be met and clearly documented in the **Office Visit Notes**:

- A. The patient is unable to move or change body position without help.
- B. The patient has limited mobility and at least one of the following: poor nutrition, incontinence, sensory impairment, or circulatory issues.
- C. The patient has a pressure ulcer on the trunk or pelvis and at least one of: poor nutrition, incontinence, sensory impairment, or circulatory issues.

Note: Not qualifying for a Group 1 support surface does not exclude hospital bed eligibility with a standard mattress.

Coverage Criteria for a Group 2 Support Surface: Low Air Loss Mattress

To be eligible for reimbursement by the patient's insurance, at least one of the following requirements must be met and clearly documented in the **Office Visit Notes**:

- A. The patient has multiple stage II trunk or pelvic pressure ulcers that have not improved after a month of comprehensive care, including use of a group 1 surface, regular professional assessment, turning and positioning, wound care, moisture/incontinence management, and nutritional intervention.
- B. The patient has large or multiple stage III/IV trunk or pelvic pressure ulcers.
- C. The patient had a myocutaneous flap or skin graft for a trunk or pelvic ulcer in the past 60 days and used a group 2 or 3 surface immediately before hospital/nursing facility discharge within the last 30 days.

Important:

- 1. If using a group 2 surface, a care plan must be set by a physician or nurse, covering all listed elements, and the patient must not bottom out on the support surface.
 - a. Group 2 coverage after flap or graft surgery is typically limited to 60 days post-surgery.
- 2. Patients who do not qualify for group 2 surfaces may still receive a hospital bed with a standard mattress.

