

# Wound Care Manufacturers

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*Submitted Electronically to [NHICdmedraftlcdfeedback@hp.com](mailto:NHICdmedraftlcdfeedback@hp.com)*

## **Re: Request for Information: Medical Grade Honey as a Surgical Dressing Component**

Dear DME MAC Medical Directors:

The Coalition of Wound Care Manufacturers (CWCM) is responding to the Durable Medical Equipment Medicare Administrative Contractor (DME MAC) request for evidence discussing the accepted use of medical grade honey in wound care. The Coalition represents leading manufacturers of wound care products used by Medicare beneficiaries for the treatment of wounds including the item that is subject to this request.

The Coalition will not be submitting clinical evidence on this issue since one of our members, DermaSciences, will be submitting comments and studies on this issue. We agree with the comments that they submitted and would request that you consider their recommendations as well as the studies they submitted when conducting your review.

However, we have two comments to make on this issue:

1. We recognize that the DME MAC medical directors have the authority to request clinical evidence on any item in a coverage policy covered and paid by Medicare; however, in this particular situation, we have concerns about this product being singled out. Currently, medical grade honey does not have its own HCPCS code or a special category in the

DMEMAC coverage policy; instead, it is a component in many dressings. In fact, medical grade honey supplements the substrate and is not the primary clinical component.

It is those surgical dressings which the medical grade honey is imbedded have the unique HCPCS codes and sections in the surgical dressing policy and that medical grade honey is one of the components of those dressings. The PDAC has had a long standing policy for coding surgical dressings with multiple components (which is also listed in the following DMEMAC surgical dressing policy article:

Products containing multiple materials are categorized according to the clinically predominant component (e.g., alginate, collagen, foam, gauze, hydrocolloid, hydrogel). Other multi-component wound dressings not containing these specified components may be classified as composite or specialty absorptive dressings if the definition of these categories has been met. Multi-component products may not be unbundled and billed as the separate components of the dressing.

Therefore, we question why a product that doesn't have its own unique HCPCS code which may qualify for a place in a section of the DMEMAC surgical dressing policy would be singled out in this request for information. The PDAC has determined that honey impregnated dressings are surgical dressings and the Coalition agrees with this classification. Furthermore, the Coalition agrees with the current surgical dressing policy and believes that honey impregnated dressings should be classified according to the substrate as they are currently.

2. Similarly, it is not clear from the notice posted why the DMEMAC medical directors are requesting the information and whether the DME MACs intend to reclassify honey impregnated surgical dressings. The Coalition would request in the future when the DME MACs post requests for information that they are more transparent with respect to the reasons for such requests.

We appreciate the opportunity to offer our comments. If you would like additional information or have any questions please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads "Karen" followed by a stylized flourish.

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