

### **Pre - PA Allowance**

None

## **Prior-Approval Requirements**

### Diagnoses

Patient must have **ONE** of the following:

- 1. Chronic dermal ulcer
- 2. Severely burned areas

### AND ALL of the following:

- a. Documented presence of necrotic tissue, sinus tracts, exudation or infection of soft and hard tissues
- b. Prescriber agrees to terminate treatment when debridement of necrotic tissue is complete and granulation tissue is well established

## **Prior - Approval Limits**

Quantity360 grams per 90 daysDuration3 months

## Prior – Approval Renewal Requirements

### Diagnoses

Patient must have **ONE** of the following:

- 1. Chronic dermal ulcer
- 2. Severely burned areas

### AND ALL of the following:

- a. Improvement in wound
- b. Prescriber agrees to terminate treatment when debridement of necrotic tissue is complete and granulation tissue is well established

# Prior - Approval Renewal Limits

Same as above