

# 2025 Skin Substitute Grafts/Cellular and Tissue-Based Products for the Treatment of Diabetic Foot Ulcers and Venous Leg Ulcers

WHAT CHANGED?	CURRENT LCD	NEW LCD
Assessments	<b>DFU</b> – Assessment of Type I or II diabetes and management history. Review HbA1C and A1C, diet, nutrition, activity, and physical exam.	<b>DFU</b> – Assessment of Type I or II diabetes and management history. Review of blood glucose level HbA1C, diet, nutrition, activity, physical exam that includes assessment of skin, ulcer, and vascular perfusion, and assessment of off-loading devices or use of appropriate footwear.
	<b>VLU</b> – Assessment of clinical history, A1C, duplex scan to confirm CEAP classification.	<b>VLU</b> – Assessment of clinical history (that includes prior ulcers, body mass index, history of pulmonary embolism or superficial/deep venous thrombosis, number of pregnancies, and physical inactivity), physical exam (edema, skin changes and vascular competence), evaluation of venous reflux, perforator incompetence, and venous thrombosis. The use of a firm strength compression garment (>20 mmHg) or multi-layered compressive dressing is an essential component of SOC for venous stasis ulcers.
Minimum Size of Ulcer	No minimum	No minimum
Smoking Cessation	Patient is a nonsmoker, or has refrained from smoking for at least 6 weeks prior to planned skin replacement surgery, or has received counseling on the effects of smoking on surgical outcomes and treatment for smoking cessation.	Smoking history; counseled on effects of smoking on wound healing. Treatment and outcomes of counseling, if applicable.
Duration of Ulcer	DFU – 4 weeks; VLU – 4 - 6 weeks	4 weeks
Standard of Care	DFU – 4 weeks; VLU – 4 - 6 weeks	4 weeks with less than 50% ulcer area reduction with documented SOC.
Treatment Window	12 weeks	12 - 16 weeks. More than 12 weeks will require documentation demonstrating progression of wound closure under current treatment plan.
Allowed Applications	12 applications	8 applications. More than 4 applications must be appended with a -KX modifier.
Switching Products	Not expected	Allowed
Reapplication (current episode)	Repeated application of a skin substitute graft after 12 weeks could result in claim denial(s) and/or initiate a request for records and complex medical review addressing DFU and VLU wound care services.	The reason(s) for any repeat application should be specifically addressed in the medical record, whether the current treatment plan has resulted in wound healing, and expectation that the wound will continue to heal with this plan. Documentation should include estimated time for extended treatment, number of additional applications anticipated, and plan of care if healing is not achieved as planned.
Retreatments (new episode of same ulcer)	Subject to medical review	The LCD does not prohibit retreatment of an ulcer that recurs in the same location after previous successful treatment.
Wastage	Only a reasonable amount of wastage is covered. See LCD for documentation requirements.	Use product in an efficient manner utilizing the most appropriate sized product available at the time of treatment (i.e., if multiple sizes, use size that best fits ulcer to minimize waste). The LCD and Billing & Coding Article has specific guidance around the utilization of the -JW and -JZ modifiers for wastage.
Diagnosis	Addresses DFU/VLU	Addresses DFU/VLU
Diagnosis Lists	No	Included in Billing and Coding Articles

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Covered for: DFUs, VLUs

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Covered for: DFUs



Access your MAC's LCD, Billing & Coding Article, and other important resources: [mimedx.info/2025-LCDs](https://mimedx.info/2025-LCDs)

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