

Medicare Advantage Medical Policy



MA: BIOENGINEERED SKIN AND SOFT TISSUE SUBSTITUTES

EFFECTIVE 01/01/2024

Description

Bioengineered skin and soft tissue substitutes may be derived from human tissue (autologous or allogeneic), nonhuman tissue (xenographic), synthetic materials, or a composite of these materials.

Bioengineered skin and soft tissue substitutes are being evaluated for a variety of conditions, including breast reconstruction and healing lower extremity ulcers and severe burns.

Autologous cell harvesting device (RECELL Sytem) is a device that enables point-of-care preparation and application using the patient's own skin for treatment of burns. The FDA approved indications are treatment of acute thermal burn wounds.

Policy

Related Policies

I.200 Amniotic Membrane and AmnioticFluid

Bioengineered Skin and Soft Tissue Substitutes

I. The use of bioengineered skin and soft tissue substitutes is considered **scientifically validated** for the following indications:

- A. Breast reconstruction **OR**
- B. Diabetic lower extremity ulcers **OR**
- C. Venous insufficiency lower extremity ulcers **OR**
- D. Dystrophic epidermolysis bullosa **OR**
- E. Second- or third-degree burns.

II. The use of bioengineered skin and soft tissue substitutes is considered **investigational** for all other indications.

Autologous Cell Harvesting Device

I. Autologous cell harvesting device (e.g., RECELL system) is considered **scientifically validated** for the treatment of 2nd and 3rd degree burns when the following criteria is met:

A. **ONE** of the following:

1. acute partial thickness (2nd and 3rd degree burns in patients 18 years of age and older **OR**
2. in combination with meshed autografting for acute full thickness thermal burn wounds in pediatric or adult patients with 3rd degree burns.

AND

B. The member has **NONE** of the following contraindications.

1. wounds clinically diagnosed as infected or with necrotic tissue present in the wound bed **AND**
2. patients with a known hypersensitivity to trypsin or compound sodium lactate solution (e.g., Hartmann's Solution **AND**
3. patients with a known hypersensitivity to anesthetics, adrenaline/epinephrine, povidone-iodine or chlorhexidine solutions **AND**

II. All other uses of autologous cell harvesting device (RECELL system) is considered **investigational**.

Background

Skin and Soft Tissue Substitutes

Bioengineered skin and soft tissue substitutes may be either acellular or cellular. Acellular products (eg, dermis with cellular material removed) contain a matrix or scaffold composed of materials such as collagen, hyaluronic acid, and fibronectin. Acellular dermal matrix (ADM) products can differ in a number of ways, including as species source (human, bovine, porcine), tissue source (eg dermis, pericardium, intestinal mucosa), additives (eg antibiotics, surfactants), hydration (wet, freeze-dried), and required preparation (multiple rinses, rehydration).

Cellular products contain living cells such as fibroblasts and keratinocytes within a matrix. The cells contained within the matrix may be autologous, allogeneic, or derived from other species (eg, bovine, porcine). Skin substitutes may also be composed of dermal cells, epidermal cells, or a combination of dermal and epidermal cells, and may provide growth factors to stimulate healing. Bioengineered skin substitutes can be used as either temporary or permanent wound coverings.

Applications

There are a large number of potential applications for artificial skin and soft tissue products. One large category is nonhealing wounds, which potentially encompasses diabetic neuropathic ulcers, vascular insufficiency ulcers, and pressure ulcers. A substantial minority of such wounds do not heal adequately with standard wound care, leading to prolonged morbidity and increased risk of mortality. For example, nonhealing lower-extremity wounds represent an ongoing risk for infection, sepsis, limb amputation, and death. Bioengineered skin and soft tissue substitutes have the potential to improve rates of healing and reduce secondary complications.

Other situations in which bioengineered skin products might substitute for living skin grafts include certain postsurgical states (eg, breast reconstruction) in which skin coverage is inadequate for the procedure performed, or for surgical wounds in patients with compromised ability to heal. Second- and third-degree burns are another indication in which artificial skin products may substitute for auto- or allografts. Certain primary dermatologic conditions that involve large areas of skin breakdown (eg, bullous diseases) may also be conditions in which artificial skin products can be considered as substitutes for skin grafts. ADM products are also being evaluated in the repair of other soft tissues including rotator cuff repair, following oral and facial surgery, hernias, and other conditions.

Codes

A2002	A2003	A2004	A2005	A2006	A2007	A2008
A2009	A2010	A2011	A2012	A2013	A2014	A2015
A2016	A2017	A2018	A2019	A2020	A2021	A4100
C1832	C1849	C9354	C9356	C9358	C9360	C9363
C9364	Q4100	Q4101	Q4102	Q4103	Q4104	Q4105
Q4106	Q4107	Q4108	Q4110	Q4111	Q4112	Q4113
Q4114	Q4115	Q4116	Q4117	Q4118	Q4121	Q4122
Q4123	Q4124	Q4125	Q4126	Q4127	Q4128	Q4130
Q4134	Q4135	Q4136	Q4141	Q4142	Q4143	Q4146
Q4147	Q4149	Q4152	Q4158	Q4161	Q4164	Q4165
Q4166	Q4167	Q4175	Q4182	Q4193	Q4195	Q4196
Q4197	Q4200	Q4202	Q4203	Q4220	Q4226	

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