This document is based on the Medicare guidelines for pressure reducing support surface progression. A pressure reducing support surface is designed to promote the healing of certain types of pressure ulcers by reducing tissue interface pressure. Most of these operate by conforming to the contours of the body, thereby distributing pressure over a larger surface area rather than a concentrated site.

**Descriptions/Definitions:**

**Group 1** pressure reducing support surfaces include:

- **Pressure pads for mattresses**
  - Gel Overlay
  - Air Mattress Overlay
  - Foam Overlay (e.g. egg crate)

- **Non-powered pressure reducing mattresses**
  - Foam mattress (can be placed directly on bed frame)
  - Air or gel mattress (can be placed directly on bed frame)

- **Powered pressure reducing mattress overlay systems**
  - Alternating pressure pump and pad (APP)

**Group 2** pressure reducing support surfaces include:

- **Powered pressure reducing mattresses** (can be placed directly on bed frame)
  - Low air loss mattress (LAL)
  - Alternating pressure mattress (APM)

**Clinical Indications**

**Group 1** Support Surfaces (as defined above in the descriptions/definitions section)

**When is a group 1 support surface considered medically necessary?**

A group 1 mattress overlay or mattress is considered **medically necessary** if the patient meets:

- Criterion 1, or
- Criterion 2 or 3 and at least one of criteria 4-7
  1. Patient is completely immobile, which means that the patient cannot change body positions without assistance.
  2. Patient has limited mobility, which means that they cannot independently change body position enough to alleviate pressure.
  3. Any stage pressure ulcer on the trunk or pelvis
  4. Impaired nutritional status
  5. Incontinence (Fecal or Urinary)
  6. Altered sensory perception
  7. Compromised circulatory status
Group 2 Support Surfaces (as defined above in the descriptions/definitions section)

When is a group 2 support surface considered medically necessary?

A group 2 support surface is considered medically necessary if the individual meets:

- Criteria 1 and 2 and 3, or
- Criterion 4, or
- Criteria 5 and 6
  1. Patient has multiple stage II pressure ulcers located on the trunk or pelvis
  2. Patient has been on a comprehensive ulcer treatment program, including the use of an appropriate group 1 mattress for at least the past 30 days.
  3. Patient’s ulcers have remained the same or worsened over the past month.
  4. Patient has large or multiple stage III or IV pressure ulcer(s) on the trunk or pelvis
  5. Patient has received recent myocutaneous flap or skin graft for a pressure ulcer on the trunk or pelvis (surgery within the past 60 days)
  6. Patient had been on a group 2 support surface immediately prior to discharge from a hospital or nursing facility