



Gammie HomeCare

Compassionate. Knowledgeable. Solutions.

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Alternating Pressure Pad and Pump Insurance Coverage Criteria

(Sore prevention, Stage I & Stage II pressure sores)

1

Prescription of Ordered Item – Alternating Pressure Pad and Pump (APP)

2

Medical Records Documenting:

1. Patient is completely immobile **OR**
2. Patient has limited mobility PLUS one of the following
 - i. Impaired nutritional status
 - ii. Fecal / urinary incontinence
 - iii. Altered sensory perception
 - iv. Comprised circulatory status
3. Patient has a pressure sore on buttocks / hip / coccyx PLUS one of the 4 secondary conditions listed above

3

Letter of Medical Necessity
(Form supplied by Gammie HomeCare if documentation qualifies for coverage)