

Insurance Coverage for Lymphedema Compression Garments and Supplies

Lymphedema Treatment Act and Who is Affected

Medicare now reimburses for compression garments and related supplies for individuals with lymphedema, following the passage of the Lymphedema Treatment Act in late 2022. This guide outlines key information specific to Original Medicare coverage; however, many commercial and Medicaid plans often adopt similar policies, so it's recommended to verify reimbursement eligibility directly with each payer.



The official Medicare page for the new coverage can be found at go.cms.gov/48PxTKf.

Requirements for Coverage

- A lymphedema diagnosis, applicable codes are:
 - Q82.0** Hereditary lymphedema
 - I89.0** Lymphedema, not elsewhere classified
 - I97.2** Postmastectomy lymphedema syndrome
 - I97.89** Other postprocedural complications and disorders of the circulatory system, not elsewhere classified
- A prescription for the item or items.
- Clinical notes must include the stage of lymphedema, and if a custom garment is ordered, notes must indicate why a standard-fit garment is not indicated for the patient.

Compression Supplies Covered

- Custom and standard-fit daytime and nighttime garments.
- Custom and standard-fit gradient compression wraps with adjustable straps.
- Bandaging supplies for the initial and ongoing phases of treatment.
- Accessories including but not limited to lining, padding, zippers, donning and doffing aids.

Quantities Covered

- **Daytime Garments**
3 sets (one garment for each affected body part) every six months.
- **Nighttime Garments**
2 sets (one garment for each affected body part) every two years.
- **Bandaging Supplies**
No set limit.
- **Accessories**
No set limit, determined on a case-by-case basis depending on needs of the patient.



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How can I enroll as a supplier eligible to bill Medicare for lymphedema compression supplies?



Complete information is available through the Supplier Enrollment and Renewal page at CMS.gov.

What are the HCPCS codes and reimbursement rates for lymphedema compression supplies?



The codes and corresponding reimbursement rates for lymphedema compression supplies can be found in the CMS DMEPOS Fee Schedule.

How can I increase visibility as a supplier of lymphedema compression supplies?



Patients can use this national directory to find suppliers who meet their needs. There's no cost to be listed. Register your business with the Supplier Directory.

lymphedemaproject.org/find-a-supplier/

One of the following Modifiers is required:

- SC** Confirms statutory and reasonable-and-necessary criteria are met
- GA** Indicates waiver of liability issued when criteria are not met (ABN must be on file)
- GY** Item/service is statutorily excluded or not a Medicare benefit, e.g. coverage does not apply
- GZ** Item/service expected to be denied as not reasonable or necessary (no ABN on file)

Other Modifiers: **RT** Right, **LT** Left, **RA** Replacement

What details and clinical notes must be included with the prescription?

The **prescription** should include clear product descriptions that correspond to the new codes, including the body part, type of garment(s), compression level if applicable, and whether a standard-fit or custom-fit item is needed.

The **clinical record** must provide the rationale for the prescribed items and clearly document the medical necessity for each garment, including a description of the lymphedema by body part, noting stage/severity, followed by the compression garment type(s) that is needed to treat that body part. The diagnosis code must be present in the prescribing clinician's notes, not just on the prescription.

Example 1: Custom-fit (made to measure) daytime flat knit and nighttime padded garment request:

Insufficient: Bilateral lower extremity garments needed for lymphedema maintenance.

Sufficient: Patient presents with severe, bilateral, congenital primary lymphedema. Patient requires daytime, custom-fit, flat knit, close-toed, thigh-high garments for each leg. Custom-fit is necessary to accommodate and deliver gradient compression throughout the affected extremities due to their abnormal, disproportionate shape. Quantity 3 for each leg is needed for proper wash and wear. A nighttime custom-fit garment for each leg, toes to upper thigh, is also necessary to soften fibrotic tissue and prevent nighttime reaccumulation of swelling. Quantity 2 for each leg is needed for proper wash and wear.

Example 2: Standard-fit (ready to wear) daytime garment request:

Insufficient: Unilateral upper extremity compression garments required.

Sufficient: Patient presents with mild, unilateral, left, upper extremity lymphedema, secondary to tumor resection in 2020. Lymphedema extends throughout the extremity from fingers to the axilla. Patient requires a standard-fit, circular knit, compression sleeve and a separate compression glove. Quantity 3 of each item is needed for proper wash and wear.

