

The 2024 National Lymphedema Act Impact on the Podiatric Practice

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Learning Objectives

1. Identify the Lymphedema Provisions of Podiatry Practice
2. Demonstrate How This Policy Can Be Incorporated Into the Podiatric Practice
3. Analyze How the Lymphedema Act Impacts Patients and Providers

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New Benefit Category as of January 1, 2024

- Lymphedema Compression Garments and Accessories
- Implications For NPE & Your Supplier Enrollment
- All Covered Later

Background

- Policy resulted from a successful legal action against CMS due to denial of compression stockings by an individual patient with lymphedema
- Nov 09, 2023: Change Request (CR) 13286
- Initial Article Released Nov 13, 2023
- Effective & Implementation Date January 1, 2024
- No planned LCD or PA
- Brand New Benefit Category
- Dedicated Web Page:

<https://med.noridianmedicare.com/web/jadme/dmepos/lymphedema-compression-treatment>

<https://med.noridianmedicare.com/web/jddme/dmepos/lymphedema-compression-treatment>

<https://www.cgsmedicare.com/jb/pubs/news/2023/12/cope147943.html>

<https://www.cgsmedicare.com/jc/pubs/news/2023/12/cope147943.html>

Lymphedema Issues to Be Tackled

- Clinical Documentation to Support Medical Necessity
- Enrollment & Supply
- Billing and Coding

How Do You Document Lymphedema?

- Lymphedema often is confused with other causes of extremity edema and enlargement.
- Understanding the risk factors and physical examination signs of lymphedema can enable the health care practitioner to accurately diagnose patients ~90% of the time.
- Confirmatory diagnosis of the disease is made using lymphoscintigraphy.

Patient History

- Parent with Lymphedema
- Turner or Noonan Syndrome
- Trauma/Prev Sx to inguinal or axillary area
- Inguinal/Axillary lymphadenectomy or radiation
- Travel to areas endemic to filariasis
- Hx. of BMI >50
- Onset 12-18 months 12-18 months after lymph node injury
- Progressive enlargement of the area
- Cellulitis

Physical Examination

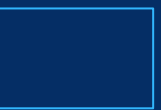
- Arms or legs involved
- Distal Extremity is involved
- Pitting Edema
- + Stemmer Sign
- Circumferential (not axial) overgrowth
- Scars in axilla or inguinal area
- **Rare** Ulceration
- Body Mass >50
- Lymphatic Vessels, lymphorrhea

Lymphedema Progression

- Patients with lymphedema exhibit pitting edema early in their disease.
- Minor swelling can be appreciated because superficial veins are less visible.
- Pressing the thumb into the dorsum of the hand or foot will illustrate the pitting edema.
- Over time more fibroadipose tissue. Reduces the amount of pitting edema
- Individuals with long-standing lymphedema may not exhibit pitting edema on physical examination.
- If the foot is not involved or there is an ulcer R/O CVI



+ Stemmer Sign



Imaging Tests

Rarely needed because History and PE are primary means of Dx
Dx US, MRI and CT are often performed but are not solely sensitive or specific to lymphedema.

They may only show skin thickening or sub edema

Lymphedema cannot be dx by histopathology.

Biopsy may only show non-specific skin and adipose inflammation

Definitive Test is lymphoscintigraphy. ^{99m}Tc -sulfur colloid inj into hand/foot

Lymphoscintigraphy

- ^{99m}Tc -sulfur colloid injected into hand/foot
- Definitive Test for Lymphedema
- Provides qualitative information (i.e., normal or abnormal lymphatic function) that is 96% sensitive and 100% specific for lymphedema. ²⁰

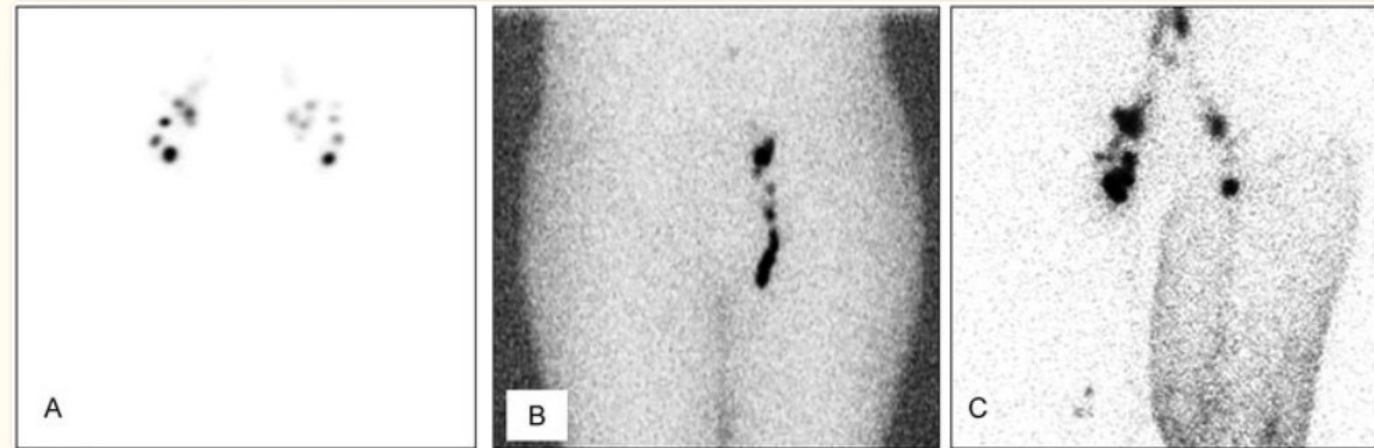


Fig. 2

Types of lymphoscintigram results. (A) Normal study showing tracer uptake into the bilateral inguinal nodes 45 minutes following injection into the feet. (B) Abnormal test illustrating absent uptake of radiolabeled colloid into the right inguinal nodes. (C) Abnormal test showing dermal backflow of tracer into the left leg.

Diagnosis Coverage for Lymphedema Compression Treatment

- Lymphedema, not elsewhere classified (I89.0)
- Hereditary Lymphedema (Q82.0)
- Postmastectomy Lymphedema Syndrome (I97.2)
- Other postprocedural complications and disorders of the circulatory system, not elsewhere classified (I97.89)

How to Supply

- Supplier Enrollment Updated to Include Lymphedema Benefit Cat.
- Issue: NPE E nor W Have **NOT** Updated the 855S (Paper or PECOS)
- When?
- Will this be overlooked for now?
- New or Amended 855?
- Implications for Inspection?

Coverage Issues

Frequency Limitations

- Payment for **three daytime** gradient compression garments or wraps with adjustable straps per **each affected extremity or part of the body** can be made once every six months.
- Payment for **two nighttime** garments or wraps per **each affected** extremity or part of the body once every two years.
- Suppliers can bill for lymphedema compression treatment items for more than one body part or area per beneficiary. Also, both a daytime (gives a higher level of compression) and nighttime (offer milder compression and less snug against skin) garment for the same body part or area can be billed per beneficiary.

Additional Covered Items

- Accessories (e.g., zippers, linings, padding or fillers, etc.) necessary for the effective use of gradient compression garment or wrap;
- The amounts of these would be tied to the garments dispensed.

Modifiers

- RT or LT or Both
- Required for the following gradient compression garments related supplies and accessories related to lymphedema compression treatment
- KX Modifier: DME MAC JA: No Others??
- RA Modifier: For those garments used to replace those irreparably damaged, lost or stolen. Not to be used for additional garments still to covered by the policy but not yet supplied.
- Portal to inquire on policy limit and same and similar: unknown at this time

Additional Covered Accessories

- As with custom AFO, each accessory must have medical necessity documented separate from the parent device.
- For example, a liner that is used with a garment could be covered under this benefit if it is determined that it is needed to prevent skin breakdown associated with wearing the garment.

Compression Garments/Wraps

- Standard Fit
- Custom Fit: Uniquely shaped and sized to fit the exact dimensions of affected extremity
- Both must provide gradient compression

Daytime Gradient Compression Garments

- Payment allowed for more than one body part
- The DME MAC would look at the HCPCS Code to differentiate between a RT UE and RT LE
- Daytime compression garments (with adjustable straps)
 - Higher level of compression than nighttime
 - 3 garments allowed per extremity or body part
 - Payment once per 6 months

Nighttime Gradient Compression

- Payment allowed for more than one body part
- Milder level of compression compared to daytime garments
- Less snug against skin than daytime garments
- Two garments per extremity or body part
- Payment is once every two years

HCPCS Codes for Lower Extremity

A6524	Gradient compression garment, lower leg and foot, padded, for nighttime use, each	A6530	Gradient compression stocking, below knee, 18-30 mmhg, each
A6525	Gradient compression garment, lower leg and foot, padded, for nighttime use, custom, each	A6533	Gradient compression stocking, thigh length, 18-30 mmhg, each
A6526	Gradient compression garment, full leg and foot, padded, for nighttime use, each	A6534	Gradient compression stocking, thigh length, 30-40 mmhg, each
A6527	Gradient compression garment, full leg and foot, padded, for nighttime use, custom, each	A6535	Gradient compression stocking, thigh length, 40 mmhg or greater, each

A6536	Gradient compression stocking, full length/chap style, 18-30 mmhg, each	A6549	Gradient compression garment, not otherwise specified
A6537	Gradient compression stocking, full length/chap style, 30-40 mmhg, each	A6552	Gradient compression stocking, below knee, 30-40 mmhg, each
A6538	Gradient compression stocking, full length/chap style, 40 mmhg or greater, each	A6553	Gradient compression stocking, below knee, 30-40 mmhg, custom, each
A6539	Gradient compression stocking, waist length, 18-30 mmhg, each	A6554	Gradient compression stocking, below knee, 40 mmhg or greater, each
A6540	Gradient compression stocking, waist length, 30-40 mmhg, each	A6555	Gradient compression stocking, below knee, 40 mmhg or greater, custom, each
A6541	Gradient compression stocking, waist length, 40 mmhg or greater, each	A6556	Gradient compression stocking, thigh length, 18-30 mmhg, custom, each
A6582	Gradient compression gauntlet, each	A6557	Gradient compression stocking, thigh length, 30-40 mmhg, custom, each
		A6558	Gradient compression stocking, thigh length, 40 mmhg or greater, custom, each
		A6559	Gradient compression stocking, full length/chap style, 18-30 mmhg, custom, each
		A6560	Gradient compression stocking, full length/chap style, 30-40 mmhg, custom, each

A6583	Gradient compression wrap with adjustable straps, below knee, 30-50 mmhg, each	A6593	Accessory for gradient compression garment or wrap with adjustable straps, not otherwise specified
A6584	Gradient compression wrap with adjustable straps, not otherwise specified		
A6585	Gradient pressure wrap with adjustable straps, above knee, each		
A6586	Gradient pressure wrap with adjustable straps, full leg, each	A6594	Gradient compression bandaging supply, bandage liner, lower extremity, any size or length, each
A6587	Gradient pressure wrap with adjustable straps, foot, each		

A6596	Gradient compression bandaging supply, conforming gauze, per linear yard, any width, each
A6597	Gradient compression bandage roll, elastic long stretch, per linear yard, any width, each
A6598	Gradient compression bandage roll, elastic medium stretch, per linear yard, any width, each
A6599	Gradient compression bandage roll, inelastic short stretch, per linear yard, any width, each

The appropriate code is determined by the yard

Charting Requirements

- Digital Photos
- Measurements of involved extremities
- Objective Findings
- Failed Treatments
- Proper History and Physical
- Failed/Successful Treatments
- General Description of item (Use HCPCS definition)
- Quantity Dispensed of each item
- Rationale for each HCPCS code dispensed
- Written Proof of Delivery (WPOD)

Written Proof of Delivery (Direct to Beneficiary)

- DOS is Date of Delivery
- Patient's Name
- Delivery Address
- Description of Item: narrative description (e.g., daytime BK compression garment 30-40mmgh), HCPCS code or long description, or brand name or narrative description
- Quantity Delivered
- Date Delivered
- Beneficiary's/beneficiary designee's signature

Reimbursement Issues

- National Fee Schedule for Each HCPCS Code
- Reimbursement: Per unit depending on HCPCS Code for Non-Custom-Made Items
- Cost: \$46-60 Per pair for non custom made

Summary of Lymphedema Compression Benefit

- New Benefit Product Category Under Medicare
- Effective January 1 2024
- Based on National Lymphedema Compression Act
- No Current LCD or PA
- Based on Medical Necessity
- Allowances are per medically necessary body part:
- 3 pairs daytime garments every 6 months
- 2 pairs nighttime garment every two years
- RT and/or LT mandatory and on separate lines
- RA: Only if billing lost, stolen or irreparable damage
- Reimbursement & Profitability is in line with Costs

Questions Concerns

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Thank You