## **Medical Policy**



## **Pressure Gradient Garments and Support Stockings**

## Description

Pressure gradient garments are designed to promote and restore normal fluid circulation to the extremities as well as to minimize excessive scarring responses in burn victims. The garments are custom made from precise measurements of the body and can vary from lymphedema sleeves for the arm, knee length to full-length stockings, waist high leotard, to various other body parts such as the hands.

## Policy

High compression support stockings, socks and hosiery provide increased support for relief from:

- Moderate to severe varicosities (varicose veins)
- Moderate edema (swelling) of legs, ankles and feet
- Moderate to severe varicose veins during pregnancy
- Severe edema and lymphedema

They can also assist in:

- Management of active venous ulcerations
- Preventing recurrence of venous ulcerations
- Preventing post-thrombotic syndrome. This is a complication that may follow a deep vein thrombosis and includes symptoms such as edema, purpura, increased skin pigmentation, itchiness, rash, ulceration and cellulitis.

Clinical evidence shows that pressure gradient garments and support stockings play a part in lowering the risk of deep vein thrombosis in post-surgical patients and those patients confined to bed. They are also used in the treatment of venous leg ulcers, severe circulatory conditions, burns and high-risk pregnancy. There is no published literature to support the efficacy of the use of compression garments for the treatment of truncal edema.

A pressure garment is designed to promote and restore normal fluid circulation to the arms and legs as well as to lessen excessive scarring in burn victims. The garments are custom made from exact measurements of the body and can vary from lymphedema sleeves for the arm, knee length to full-length stockings, waist high leotard and to various other body parts such as the hands.

Inclusionary and Exclusionary Guidelines (clinically based guidelines that may support individual consideration and pre-authorization decisions)

#### Inclusions:

Pressure Gradient Support Garments:

- Pressure gradient support stockings are covered when medically necessary for the treatment of open venous stasis ulcers, severe circulatory conditions, high-risk pregnancy or post-surgical care.
- Garments must be at or above 18 mmHg.

#### Limitations:

- No more than four (4) support garments per year.
- Additional support garments will be covered if the member's primary care
  physician determines they are required due to significant gain or loss in
  weight or change in the patient's condition.
- Support garments are considered not reasonable and necessary for the prevention of stasis ulcers or for the prevention of the reoccurrence of stasis ulcers that have healed.

#### Burn Pressure Garments:

 Covered for when medically necessary to enhance healing, reduce swelling, treat contractures and hypertrophic scars suffered by severely burned patients.

#### Limitations:

None

Stockings, which have a pressure of less than 20 mm Hg (e.g., elastic stockings, surgical leggings, anti-embolism stockings (Ted hose) or pressure leotards) are considered experimental and investigational because these supplies have not been proven effective in preventing thromboembolism. They are also not considered reasonable and necessary because they are not primarily medical in nature.

Custom-ordered/fitted compression garments (e.g., stocking/burn garment/gradient pressure aid garment/sleeve) are considered reasonable and necessary for patients when the garment functions as a gradient pressure aid with a degree of pressure which is at least 18 mmHg, requires a physician order (prescription) to be dispensed, and meets **one or more** of the following conditions:

- Treatment of complications of chronic venous insufficiency:
  - -Varicose veins (except spider veins)
  - -Stasis dermatitis (venous eczema)

- -Venous ulcers (stasis ulcers)
- -Venous edema
- -Lipodermatosclerosis
- Prevention of thrombosis in immobilized persons (e.g., immobilization due to surgery, trauma, general debilitation, etc.)
- Post-thrombotic syndrome (post-phlebitic syndrome)
- Chronic lymphedema, including lymphedema as a physical complication of mastectomy
- Edema following surgery, fracture, burns, or other trauma
- Post sclerotherapy
- Postural hypotension
- Severe edema in pregnancy
- DVT prophylaxis during pregnancy and postpartum
- Edema accompanying paraplegia, quadriplegia, etc.
- Orthostatic hypotension
- Significant burn with risk of post burn contracture, skin grafting and hypertrophic scarring
- Compression garments for the chest, labia, trunk or neck are experimental
  and investigational. There is a lack of peer-reviewed published literature
  evaluating the clinical utility of compression garments for these types of
  lymphedema.
- Compression garments for the legs are considered experimental and investigational for improving functional performance in individuals with Parkinson's disease.

Non-elastic leg binders are considered reasonable and necessary for members who meet the selection criteria for pressure gradient support stockings listed above. Non-elastic leg binders are similar to graded compression stockings in that they provide static compression of the leg, but unlike graded compression stockings, they do not use elastic, but use adjustable Velcro or buckle straps.

For codes A6531 and A6532, one unit of service is generally for one stocking. However, if a manufacturer has a product consisting of two components which are designed to be worn simultaneously on the same leg, the two components must be billed as one claim line with one unit of service – e.g., a product which consists of an unzippered liner and a zippered stocking.

Modifiers A1-9 are not used with codes A6531 and A6532. The right (RT) and left (LT) modifiers must be used with codes A6531 and A6532 for gradient compression stockings. When the same code for bilateral items (left and right) is billed on the same date of service, bill both items on the same claim line using LTRT modifiers and 2 units of service.

A6501-A6513 are covered when they are used to reduce hypertrophic scarring and joint contractures following a burn injury.

# **▼HCPCS Level II Codes and Description**

| A4465 | Non-elastic binder for extremity  |
|-------|---|
| A4490 | Surgical stocking, above knee length, each                              |
| A4495 | Surgical stockings, thigh length, each                                  |
| A4500 | Surgical Stocking, below knee length, each                              |
| A4510 | Surgical Stocking, full length, each                                    |
| A6530 | Gradient compression stocking, below knee, 18-30 mmHg, each             |
| A6531 | Gradient compression stocking, below knee, 30-40 mmHg, each             |
| A6532 | Gradient compression stocking, below knee, 40-50 mmHg, each             |
| A6533 | Gradient compression stocking, below knee, 18-30 mmHg, each             |
| A6534 | Gradient compression stocking, thigh length, 30-40 mmHg, each           |
| A6535 | Gradient compression stocking, thigh length, 40-50 mmHg, each           |
| A6536 | Gradient compression stocking, full length, chap style 18-30 mmHg, each |
| A6537 | Gradient compression stocking, full length/chap style, 30-40 mmHg, each |
| A6538 | Gradient compression stocking, full length/chap style, 40-50 mmHg, each |
| A6539 | Gradient compression stocking, waist length, 18-30 mmHg, each           |
| A6540 | Gradient compression stocking, waist length, 30-40 mmHg, each           |
| A6541 | Gradient compression stocking, waist length, 40-50 mmHg, each           |
| A6542 | Gradient compression stocking, custom made                              |
| A6543 | Gradient compression stocking, lymphedema                               |

| A6544 | Gradient compression stocking, garter belt  |
|-------|---|
| A6545 | Gradient compression wrap, non-elastic, below knee, 30-50 mmHg each                               |
| A6549 | Gradient compression stocking, not otherwise specified  |
| A6501 | Compression burn garment, bodysuit (head to foot), custom fabricated                              |
| A6502 | Compression burn garment, chin strap, custom fabricated   |
| A6503 | Compression burn garment, facial hood, custom fabricated  |
| A6504 | Compression burn garment, glove to wrist, custom fabricated                                       |
| A6505 | Compression burn garment, glove to elbow, custom fabricated                                       |
| A6506 | Compression burn garment, glove to axilla, custom fabricated                                      |
| A6507 | Compression burn garment, foot to knee length, custom fabricated                                  |
| A6508 | Compression burn garment, foot to thigh length, custom fabricated                                 |
| A6509 | Compression burn garment, upper trunk to waist including arm openings (vest), custom fabricated   |
| A6510 | Compression burn garment, trunk, including arms down to leg openings (leotard), custom fabricated |
| A6511 | Compression burn garment, lower trunk including leg openings (panty), custom fabricated           |
| A6512 | Compression burn garment, not otherwise classified  |
| A6513 | Compression burn mask, face and/or neck, plastic or equal, custom fabricated                      |

## **▼** Important Note:

Northwood's Medical Policies are developed to assist Northwood in administering plan benefits and determining whether a particular DMEPOS product or service

is reasonable and necessary. Equipment that is used primarily and customarily for a non-medical purpose is not considered durable medical equipment.

Coverage determinations are made on a case-by-case basis and are subject to all of the terms, conditions, limitations, and exclusions of the member's contract including medical necessity requirements.

The conclusion that a DMEPOS product or service is reasonable and necessary does not constitute coverage. The member's contract defines which DMEPOS product or service is covered, excluded or limited. The policies provide for clearly written, reasonable and current criteria that have been approved by Northwood's Medical Director.

The clinical criteria and medical policies provide guidelines for determining the medical necessity for specific DMEPOS products or services. In all cases, final benefit determinations are based on the applicable contract language. To the extent there are any conflicts between medical policy guidelines and applicable contract language, the contract language prevails. Medical policy is not intended to override the policy that defines the member's benefits, nor is it intended to dictate to providers how to direct care. Northwood Medical policies shall not be interpreted to limit the benefits afforded to Medicare or Medicaid members by law and regulation and Northwood will use the applicable state requirements to determine required quantity limit guidelines.

Northwood's policies do not constitute medical advice. Northwood does not provide or recommend treatment to members. Members should consult with their treating physician in connection with diagnosis and treatment decisions.

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Applicable URAC Standard

| ipplicable cities standard |                                     |  |  |  |
|----------------------------|-------------------------------------|--|--|--|
| Core 8                     | Staff operational tools and support |  |  |  |

Change/Authorization History

| Revision<br>Number | Date     | Description of Change                           | Prepared/Reviewed by | Approved by    | Review<br>Date: |
|--------------------|----------|---|----------------------|----------------|-----------------|
| А                  | Nov.2008 | Initial Release                                 | Rosanne Brugnoni     | Ken Fasse      | n/a             |
| 01                 |          | Annual Review                                   | Susan Glomb          | Ken Fasse      | Dec. 2008       |
| 02                 | 12-22-09 | Annual Review/ no changes                       | Susan Glomb          | Ken Fasse      | Dec. 2009       |
| 03                 |          | Annual review – policy update                   | Susan Glomb          | Ken Fasse      | Dec. 2010       |
| 04                 | 07-20-11 | Added Important Note to all<br>Medical Policies | Susan Glomb          | Dr. B. Almasri | _               |

| 05 | 8-24-11  | Added ICD-9 code 459.81<br>Venous Insufficiency to graph  | Susan Glomb  | Dr. B. Almasri |           |
|----|----------|---|--------------|----------------|-----------|
| 06 | 12-08-11 | Annual Review. Added code<br>A4465 (Non-elastic binder for<br>extremity). Added References to<br>Policy   | Susan Glomb  | Dr. B. Almasri | Dec. 2011 |
| 07 | 12-03-12 | Annual review – no changes.   | Susan Glomb  | Dr. B. Almasri | Dec. 2012 |
| 08 | 12-11-13 | Annual review. No changes.  | Susan Glomb  | Dr. B. Almasri |           |
| 09 | 12-1-14  | Annual Review. Added burn<br>garments to this policy and<br>removed them from the surgical<br>dressing policy.  | Susan Glomb  | Dr. B. Almasri |           |
| 10 | 12-16-15 | Annual Review. No changes   | Susan Glomb  | Dr. B. Almasri | 12-16-15  |
| 11 | 12-19-16 | Annual Review. No Changes.  | Lisa Wojno   | Dr. B. Almasri | 12-19-16  |
| 12 | 11-17-17 | Annual review. Updated policy to reflect compression garments for legs are considered experimental and investigational for improving functional performance in Parkinson's disease. | Carol Dimech | Dr. C. Lerchin | 11-17-17  |
| 13 | 1-16-18  | Revised quantity limits of A6545<br>to reflect 4 support garments per<br>year and removed 1 per 6 months.<br>Removed surgical dressing<br>guidelines.                               | Carol Dimech | Dr. C. Lerchin | 1-16-18   |
| 14 | 11-19-18 | Annual review. No changes except for Jan. 2018 changes.   | Carol Dimech | Dr. C. Lerchin | 11-19-18  |