OHCA Guideline

Medical Procedure Class:	Gradient Compression Garments
Initial Implementation Date:	December 1, 2021
Last Review Date:	N/A
Effective Date:	December 1, 2021
Next Review/Revision Date:	December 2024

^{*} This document is not a contract, and these guidelines do not reflect or represent every conceived situation. Although all items contained in these guidelines may be met, this does not reflect, or imply, any responsibility of this agency or department to change the plan provision to include the stated service as an eligible benefit.

X New Criteria ☐ Revision of Existing Criteria

Summary Purpose: To provide guidelines to assure medical necessity and consistency in the prior authorization process.

Definitions

Compression Wrap - An elastic bandage used to prevent or reduce the formation of edema. The wrap is applied starting distally; it uses overlapping spirals to progress proximally. Greater pressure is applied distally than proximally, creating a compression gradient that encourages venous and lymphatic return.

Compression Gradient - Refers to the difference in pressure exerted over the length of the wrap. For example, the squeezing pressure at the ankle is usually greatest, gradually diminishing proximally toward the thigh and waist region.

Chronic Venous Insufficiency - A condition characterized by poor flow of venous blood, especially in the leg veins.

Chronic Lymphedema - Lymphedema refers to swelling that generally occurs in one of the arms or legs. Sometimes both arms or both legs swell. Lymphedema occurs when your lymph vessels are unable to adequately drain lymph fluid, usually from an arm or leg. Lymphedema can be either primary or secondary. This means it can occur on its own (primary lymphedema), or it can be caused by another disease or condition (secondary lymphedema). Secondary lymphedema is far more common than primary lymphedema.

Lipodermatosclerosis - Thickening and red discoloration of the skin due to diminished blood flow, usually caused by local or regional venous obstruction.

Post thrombotic syndrome (post phlebitic syndrome) - Symptomatic chronic venous insufficiency after deep venous thrombosis (DVT).

Postural hypotension - Orthostatic (postural) hypotension is an excessive fall in blood pressure (BP) when an upright position is assumed. The consensus definition is a drop of > 20 mm Hg systolic, 10 mm Hg diastolic or both.

Sclerotherapy – Sclerotherapy involves injecting a solution directly into the vein to treat varicose and spider veins. The sclerotherapy solution causes the vein to scar, forcing blood to reroute through healthier veins. The collapsed vein is reabsorbed into local tissue and eventually fades.

Compression stockings or bandages may be used (usually for about two weeks) to maintain compression on the treated veins.

Stasis dermatitis (venous eczema) - Skin changes that follow blood stasis due to varicose veins, CHF, etc., with swelling of lower extremities, especially feet and ankles; due to extravasation of fluid into adjacent tissue, which interferes with regional nutrition and disposal of intracellular metabolites. Skin pigmented, inflamed, open ulcers that heal slowly, early skin atrophy, followed by thickening due to itching. Eczema of the legs with edema, pigmentation, and sometimes chronic inflammation. It is usually due to impaired return of blood from the legs. Compression stockings help the rash to resolve gradually.

Varicose veins (except spider veins) - Dilated, tortuous, elongated superficial veins that are usually seen in the legs.

Venous edema - Venous dysfunction is related to a primary defect in the venous valves of the superficial or deep veins, post-thrombotic deep vein valvular incompetence, incompetent distal perforator veins, deep vein valvular dysgenesis, dysfunction of the muscle pump, or compression that impedes venous return. Venous insufficiency generates venous stasis and increases ambulatory distal pressure, which is the cause of the vicious circle of events. Induced venous dilatation results in a defect in valvular coaptation. Increased venous pressure is the cause of microangiopathy, which is the source of skin trophic changes. Edema of chronic venous disease is sporadic, unilateral or bilateral, has no component of inflammation, is limited to the legs, but may also involve proximal parts of the lower extremity, is enhanced by prolonged orthostatic posture, and is improved by raising the legs.

Venous Stasis Ulcer - A poorly and slowly healing ulcer, usually located on the lower extremity above the medial malleolus. It is typically edematous, pigmented, and scarred. The skin is extremely fragile and easily injured.

Description

Gradient compression garments are elastic clothing with an engineered compression gradient that can be worn on limbs, upper, lower, or full body to use for specific medical diagnoses and therapy to prevent/reduce abnormal swelling.

Fitted prescription graded compression stockings are considered medically necessary for members who have qualifying medical conditions.

CPT Codes Covered Requiring Prior Authorization (PA)

Codes	Type of Compression Item	Extremity of compression	Gradient pressure of compression
A6530	Gradient compression stocking	below knee	18-30mmHg
A6531	Gradient compression stocking	below knee	30-40mmHg
A6532	Gradient compression stocking	below knee	40-50mmHg
A6533	Gradient compression stocking	thigh length	18-30mmHg
A6534	Gradient compression stocking	thigh length	30-40mmHg
A6535	Gradient compression stocking	thigh length	40-50mmHg
A6536	Gradient compression stocking	full length/chap	18-30mmHg
A6537	Gradient compression stocking	full length/chap	30-40mmHg
A6538	Gradient compression stocking	full length/chap	40-50mmHg
A6539	Gradient compression stocking	waist length	18-30mmHg
A6540	Gradient compression stocking	waist length	30-40mmHg
A6541	Gradient compression stocking	waist length	40-50mmHg
A6544	Gradient compression stocking	garter belt	
A6545	Gradient compression stocking wrap, non-elastic	below knee	30-50mmHg
A6549	Gradient compression stocking, stocking/sleeve	not otherwise specified	

Approval Criteria

I. GENERAL

Medical necessity must be met. All documentation submitted to request services or substantiate previously provided services must demonstrate through adequate objective medical records, evidence sufficient to justify the member's needs for the service in the most cost-effective manner, in accordance with the OAC 317:30-3-1.

Documentation requirements include:

- Prescription or letter of medical necessity indicating the requested gradient pressure of compression
- Objective documentation from medical records including:
 - Physician or other qualified medical professional (Nurse Practitioner, Physician Assistant) plan of treatment
 - History and physical exam
 - o Objective findings which establish the severity of the condition
 - Surgical history
 - o Presence of edema
 - History of previous conservative treatments including successful and/or failed outcomes (including but not limited to off-loading, weight reduction, blood sugar control, smoking cessation, etc.)
 - Current documentation (within 3 months) of any wound(s) length, width and depth

II. INDICATIONS

- 1. Treatment for any of the following complications of chronic venous insufficiency:
 - 1. Lipodermatosclerosis
 - 2. Stasis dermatitis (venous eczema)
 - 3. Varicose veins (except spider veins)
 - 4. Venous edema
 - 5. Venous ulcers (stasis ulcers) Note: A6531 and A6532 may be covered by Medicare when used as treatment of venous stasis ulcers
- 2. Edema accompanying paraplegia, quadriplegia, etc.
- 3. Edema following surgery, fracture, burns, or other trauma
- 4. Post sclerotherapy (excludes inflatable compression garments as there is no proven value for this indication)
- 5. Post thrombotic syndrome (post-phlebitic syndrome)
- 6. Postural hypotension
- 7. Prevention of thrombosis in immobilized persons (e.g., immobilization due to surgery, trauma, general debilitation, etc.)
- 8. Chronic lymphedema
- 9. Severe edema in pregnancy

Note: Compression therapy is contraindicated in patients with peripheral artery disease, acute lower extremity superficial or deep vein thrombosis, acute or chronic heart failure, or in the presence of acute cellulitis, infection, or necrotic tissue. Noninvasive arterial studies should be performed on patients with lower extremity ulcer who have weak or nonpalpable pulses or risk factors for atherosclerosis. Cellulitis and deep vein thrombosis should be treated prior to placement of compression bandages.¹

III. FREQUENCY

Two pairs of compression stockings are considered medically necessary in the initial purchase (the 2nd pair is for use while the 1st pair is being cleaned).

IV. CONTINUED MEDICAL NECESSITY

Replacements are considered medically necessary when the compression garment cannot be repaired or when required due to a change in the member's physical condition. For pressure gradient support stockings, no more than 4 replacements per year are considered medically necessary for wear.

Discontinuation Criteria

Prior Authorizations will expire one year from the date of PA approval.

Stockings purchased over the counter (OTC) without a prescription which have a pressure of less than 20 mm Hg (e.g., elastic stockings, support hose, surgical leggings, anti-embolism stockings (Ted hose) or pressure leotards) are considered experimental and investigational as these supplies have not been proven effective in preventing thromboembolism. Note: These OTC stockings are also not covered because they are not primarily medical in nature.

Additional Information

Requests for gradient compression garments outside of this guideline will be referred for medical director review.

References

- 1. Compression therapy for the treatment of chronic venous insufficiency UpToDate 8/19/2021
- 2. Oklahoma Health Care Authority Policy Manual, OAC 317:30-5-211.10. Durable medical equipment (DME).
- 3. Aetna Policy #0482, Compression Garments for the Legs, 6/17/2021 Compression Garments for the Legs Medical Clinical Policy Bulletins | Aetna
- 4. Definitions https://medical-dictionary.thefreedictionary.com and www.mayoclinic.org and <a href="https://medical-dictionary.thefreedictiona
- 5. Lymphedema Treatment Act https://lymphedematreatmentact.org/wp-content/uploads/2019/01/Federal-and-Medicaid-Compression-Coverage-List.pdf