



# The Lymphedema Treatment Act

~ HR 3877 ~

## SUPPORTERS INCLUDE:

- American Cancer Society
- Oncology Nursing Society
- Komen Advocacy Alliance
- American Physical Therapy Association
- American Occupational Therapy Association
- LiveSTRONG
- Colon Cancer Alliance
- Sarcoma Foundation of America
- American Lymphedema Framework Project
- Lymphedema Advocacy Group
- Lymphatic Education and Research Network
- Lymphology Association of North America
- National Lymphedema Network

## ORIGINAL SPONSORS:

Rep. Reichert (WA-8)  
Rep. Lance (NJ-7)  
Rep. Blumenauer (OR-3)  
Rep. Braley (IA-1)

For more information, or to cosponsor this bill, please contact Lindsay Manson in Rep. Reichert's office at:  
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## WHY THIS LEGISLATION IS NEEDED:

Lymphedema is a chronic but treatable disease that results in an accumulation of lymph fluid (swelling) in parts of the body where lymph nodes or lymphatic vessels are damaged or inadequate. Lymphedema affects millions of Americans. Among the many causes, damage from cancer treatment is the most common.

Untreated or under-treated lymphedema becomes progressive, leading to increased morbidity, thus placing a costly burden on patients and the health care system. These risks and higher costs can be effectively mitigated with proper, consistent treatment. Complete Decongestive Therapy (CDT) is the standard of care for lymphedema, and is a multi-modal treatment that is only effective when used in its entirety.

Medicare currently does not cover the most critical component of CDT, the medically necessary compression supplies used daily in lymphedema treatment, citing they do not fit under any existing benefit category. Without the use of compression patients cannot manage the related swelling and maintain their condition. As a result, many suffer from recurrent infections, progressive degradation in their condition and, too often, disability.

## WHAT THIS LEGISLATION WILL DO:

- Provide for Medicare coverage of the doctor-prescribed compression supplies that are essential to the effective treatment of lymphedema;
- Reduce the total healthcare costs associated with this disease by decreasing the incidence of complications, co-morbidities and disabilities resulting from this medical condition.

The HHS Secretary has confirmed that a change in statute is necessary (see page 2) to allow for coverage of the compression supplies that are the conservative, time-proven cornerstone of lymphedema treatment. The Lymphedema Treatment Act will amend Sec. 1861 [42 U.S.C. 1395x] of the Social Security Act to enable coverage of these items under Durable Medical Equipment. No other proposed revision or reform of Medicare, or health care law, will rectify this unintended gap in coverage.



## WHY MEDICARE BENEFICIARIES ARE NOT CURRENTLY RECEIVING THE STANDARD OF CARE FOR LYMPHEDEMA:

### **Congressman Dave Reichert's question to HHS Secretary Sebelius (2/2012)**

*Lymphedema affects an estimated 1.5 to 3 million Medicare beneficiaries. Individuals often need constant care to avoid recurrent infections. While Medicare does cover and pay for statutorily limited therapy and sequential compression pumps, many patients suffer from recurrent infections, progressive degradation in their condition and eventual disability because they cannot afford the compression bandages and garments required for everyday self-care. I have heard from patients and providers that state compression garments are a necessary form of treatment for patients with Lymphedema. They state compression garments help to improve the quality of life and stave off reoccurring infections for patients. Why does CMS not cover these treatments? Does CMS need a statutory change in order to provide coverage for these garments?*

### **Secretary Sebelius's response (8/2012)**

*Currently, Medicare covers durable pneumatic compressors, referred to as lymphedema pumps, and appliances used in conjunction with these pumps under the Part B benefit for durable medical equipment. These equipment and accessories are used to treat lymphedema and are covered because they fall under a defined Medicare benefit category. In order for items to be covered by Medicare, they must meet the definition of a Medicare-covered benefit defined in the statute. However, it is important to note that although Medicare provides coverage for certain items, it does not provide coverage for every item with potential use for a person with a medical problem even if a physician prescribes the item. Other devices used to treat lymphedema, such as sleeves and stockings, are not covered by Medicare because they do not meet the definition of durable medical equipment or any other Medicare benefit category established by law.*

## ADDITIONAL INFORMATION ABOUT LYMPHEDEMA CAN BE FOUND AT THE FOLLOWING GOVERNMENT WEBSITES:

### **The National Cancer Institute at the National Institutes of Health**

[www.cancer.gov/cancertopics/pdq/supportivecare/lymphedema/healthprofessional/page1](http://www.cancer.gov/cancertopics/pdq/supportivecare/lymphedema/healthprofessional/page1)

[www.cancer.gov/cancertopics/pdq/supportivecare/lymphedema/Patient](http://www.cancer.gov/cancertopics/pdq/supportivecare/lymphedema/Patient)

### **The Agency for Healthcare Research and Quality**

[www.guideline.gov/content.aspx?id=15699](http://www.guideline.gov/content.aspx?id=15699)

## SUPPORTING STUDIES AND OTHER INFORMATION IS AVAILABLE THROUGH THE LYMPHEDEMA ADVOCACY GROUP (LAG):

LAG is an all-volunteer, patient-driven effort to support the Lymphedema Treatment Act.

**Please contact Heather Ferguson, Executive Director:** [info@LymphedemaTreatmentAct.org](mailto:info@LymphedemaTreatmentAct.org)

