

Chapter 8

Section 17.1

Lymphedema

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Revision:

1.0 HCPCS PROCEDURE CODES

Level II Codes E0650 - E0673

2.0 DESCRIPTION

Lymphedema refers to edema from accumulation of lymph secondary to obstruction to its flow.

3.0 POLICY

3.1 Lymphovenous anastomosis by open surgical correction is a covered benefit.

3.2 Lymphedema pumps, both segmental and non-segmental, are authorized durable medical equipment for both institutional and home use.

4.0 POLICY CONSIDERATIONS

A physician's prescription is required for all claims for the segmental type pumps with or without a calibrated pressure gradient.

5.0 EXCEPTION

Lymphovenous anastomosis by use of a special needle for insertion of lymphatic vessels directly into the veins is not a covered benefit.

- END -

