



Now With the Powerful Synergy of



Optimize Garment Selection To Meet & Exceed the New Medicare Standard

The Impact of a New Written Standard

**Now that Medicare has
Established a Written
Standard, it Changes a Lot
of Historical Behaviors**



At-Home Maintenance Phase

- **Day Garments**
- **Night Garments**
- **Accessories**
 - **Donning Aids**
 - **Care Kits**



Change #1: Garment Selection

Day Garments (3 Per Affected Body Part)

- **Order 3 All at Once**
- **If RTW – Most Cost-Effective**
- **If CUSTOM – Ship 1 for Fit, 2 Upon Approval**



Change #1: Garment Selection

Night Garments (2 Per Affected Body Part)

- **Order 2 All at Once**
- **Same Process for RTW Vs Custom**
- **OR Order 1 Now and 1 in 12 Months**
- **Offers a Fresh Replacement**



CHEAT SHEET: Garment Selection

CHEAT SHEET: GARMENT SELECTION

Use these Simple Case Studies as a Helpful Starting Point to Guide Your Garment Selection and Optimize Patient Options Within the Newly-Established Medicare Standard

The Newly Established Medicare Standard Recommends 3 Day Garments per Every 6 Months and 2 Night Garments per Every 24 Months for Each Affected Body Part. Here are 2 case studies that demonstrate ways this allowable can be dispensed.

CASE 1 No Wraps Used
This Case Study follows the new Medicare standard without the use of Velcro Wraps...

CASE 2 Wraps Included
This Case Study offers more options when Velcro Wraps are used during the active treatment phase...

A Day Garments (3 Per Affected Body Part)

- Order 3 All at Once
- If RTW, it's Just as Easy to Exchange 3 as it is 1 (and a Lot More Cost Effective for Shipping/Ordering)
- If CUSTOM, We'll Ship 1 for Fit & Release 2 More Upon Approval

B Night Garments (2 Per Affected Body Part)

- Order 2 All at Once
- Same Process for RTW Vs Custom
- OR Order 1 Now and 1 in 12 Months
- Offers a Fresh Replacement at the Midpoint of Lifecycle

OPTION 1

A Dispense Wrap as a Day Garment

- Used for Reduction & Containment During Active Treatment Phase
- Dispensed Normally

B Day Garments (2 Instead of 3)

- 1 to Wash, 1 to Wear

C Night Garments (Standard 2)

- 1 to Wash, 1 to Wear

OPTION 2

A Dispense Wrap as a Night Garment

- Used for Reduction & Containment During Active Treatment Phase
- Dispense with Padding

B Day Garments (Standard 3)

- 1 to Wash, 1 to Wear, 1 Stored

C Night Garments (1 Instead of 2)

- 1 to Wear

* These Case Studies Provide Common Examples, but Many Other Combinations of Garments are Possible.

Talk to One of Our Certified Fitters Anytime...

Scan for Other Time-Saving Ideas

Not questions about documentation, garment selection, or your Case Managers are always here to help.



Change #1: Garment Selection

How Do Velcro Wraps Factor Into the Mix?

- **OPTION 1**
 - **Dispense as a Day Garment**
- **OPTION 2**
 - **Dispense as a Night Garment**
 - *Order with Pad or Swell Spot*



CHEAT SHEET: Velcro Wraps

CHEAT SHEET: ORDERING VELCRO WRAPS
Velcro Wraps Have Exploded in Popularity for Reduction and Containment During the Active Treatment Phase, Particularly When Bandaging May No Longer Be Part of Your Therapist Toolbox. Velcro Wraps Count as a Day Garment by Default; But...

But Medicare Patients (Both Traditional Medicare and Medicare Advantage Plans) are Still Limited to 3 Day Garments and 2 Night Garments Per Affected Body Part and VELCRO WRAPS COUNT! Here's some Best Practice for Incorporating Wraps Into Your Strategy:

TIPS	You CAN Wrap
	Always ask us because some private insurance carriers don't count the Medicare limits, but when the Patient is 65+, you've got to think creatively about what to dispense, when. We can help you optimize benefits and build a garment plan that give the patient lots of options at home...

OPTION 1
A Dispense Wrap as a Day Garment

- Used for Reduction & Containment During Active Treatment Phase
- Ordered by Itself

B Day Garments (2 Instead of 3)

- 1 to Wash, 1 to Wear

C Night Garments (Standard 2)

- 1 to Wash, 1 to Wear

OPTION 2
A Dispense Wrap as a Night Garment

- Used for Reduction & Containment During Active Treatment Phase
- Ordered with Pad or Swell Spot

B Day Garments (Standard 3)

- 1 to Wash, 1 to Wear, 1 Stored

C Night Garments (1 Instead of 2)

- 1 to Wear

OPTION 3
A Dispense 2 Wraps (1 Day / 1 Night)

- Used for Reduction & Containment During Active Treatment Phase
- Ordered by Itself

B Day Garments (2 Instead of 3)

- 1 to Wash, 1 to Wear

C Night Garments (1 Instead of 2)

- 1 to Wear

OPTION 4
A Dispense 2 Wrap as Night Garments

- Used for Reduction & Containment During Active Treatment Phase
- Ordered with Pad or Swell Spot

B Day Garments (Standard 3)

- 1 to Wash, 1 to Wear, 1 Stored

C Night Garments (0)

- Only

COMPRESSION CARE
Scan for Other Tips
And if you've...
or in...

COMPRESSION CARE
Talk to One of Our Certified...
*We've Provided Common Examples, but Many Other Combinations...



Change #2: Plan of Care

How Medicare Has Impacted Documentation

- **Garment Plan with 3 Day / 2 Night**
- **Justification for Custom, Accessories**
- **Garment Maintenance Kit**
- **Skin Care Treatments**



CHEAT SHEET: Modern Plan of Care

CHEAT SHEET: MODERN PLAN OF CARE

Now that Medicare Audits are Revealing the Standards of Documentation Necessary to Comply with Requirements of the New Coverage Mandated by the LTA, Here are Some Basics That Should Be in Any Modern Plan of Care.

TIPS

Best Practices

Best Practices are now rapidly evolving based on Medicare's newly-established standards for lymphedema coverage. Here are some tips for building a modern Plan of Care that: (1) establishes a relevant diagnosis, (2) properly documents the need for custom garments, whenever necessary, and (3) meets or exceeds Medicare's standard garment plan...

Your Plan of Care for both the Active Treatment and At-Home Maintenance Phases of Lymphedema Treatment Now have Established Medicare Standards. Here are Some New "Best Practices" to Incorporate Into Your Plan of Care:

A Clearly Establish a Relevant Diagnosis Code

- Lymphedema Dx **MUST** Be Diagnosed by You AND the Referring Physician
- Medicare **ONLY** Acknowledges the Dx by an MD/NP/PA/DO
- Even Though **YOU** Probably First Confirmed Lymphedema

B Your Plan of Care Must Document Relevant Criteria for Custom Garments

- This is **CRITICAL** for Medicare Coverage of Custom Garments
- Your Plan of Care **MUST** Document One or More Acceptable Reasons
- Here are Samples of Current Best Practices:
 - Patient is unable to don the garment independently without a donating aid.
 - Patient requires the wall stability of flat knit material to adequately manage lymphedema long-term due to stage and tissue density.
 - Patient will benefit from custom flat-knit fabric as the texture of her skin is inappropriate for ready to wear garments.
 - Due to history of infection, silver flat knit fabric is required.
 - A silicone border is required to hold the garment in place and prevent slipping.
 - Patient requires [ACCESSORY] added to garment because [REASON].
 - Patient requires custom garment because [REASON(S)] RTW WON'T WORK AND/OR [REASON(S)] LAT KNIIT IS [REQUIREDD].

C Your Plan of Care Should Recommend a Garment Plan that Meets or Exceeds the Newly-Established Medicare Standard

- Why? Patient Outcomes & Professional Risk Management
- Here are Elements of a Sample Garment Plan that Meets or Exceeds:
 - 3 Day Garments per Affected Body Part, Per Every 6 Months
 - 2 Night Garments per Affected Body Part, Per Every 24 Months
 - Accessories for Donning & Doffing as Required for Compliance
 - Garment Maintenance as Required for Compliance
 - Skin Care Treatments for Health & Safety

It's Always Important to Consult Your Legal Counsel Regarding Compliance & Risk Management Issues.

Talk to One of Our Experts Anytime...

For Other Time-Saving Ideas

Get questions about documentation, garment selection, and your Case Managers are always here to help.



807-3334 Fax Referrals@CompressionCare.com



Change #3: Professional Risk

Document Your Recommendations to the Patient

- HAS to be the Patient's Decision to Do Less
- No Longer SAFE to Advise Patients to Do Less
- Patients Need to Make Financial Decisions
- Patients Need to Choose
- Just Like Following AMA Standards



CHEAT SHEET: Professional Risk

CHEAT SHEET: HOW TO MANAGE RISK
Now That Medicare Has Established a First-Ever Written Standard for Compression Garments, It's Important to Update Your Best Practices to Manage the Professional Risk Associated with These New Documented Standards.

Your Plan of Care for the At-Home Maintenance Phase of Lymphedema Treatment Now has a First-Ever Written Standard. Here are Important Considerations to Help Manage the Professional Risk These New Standards Pose for You & Your Clinic:

STEP 1 Documentation
Loop your Referring Physician into your diagnosis and documentation, and request same...

STEP 2 Garment Plan
Make sure your garment plan meets or exceeds the new Medicare Standard, and don't advise less...

A Medicare Audits Have Revealed Flaws in Our Historic Approach

- Lymphedema Dx **MUST** Be Diagnosed by You **AND** the Referring Physician
- Medicare **ONLY** Acknowledges the DX by an MD/NP/PA/DO
 - Even Though **YOU** Probably First Confirmed Lymphedema

B The Physician Who Signs the RX Must Have the Same Dx in Office Notes

- This is **CRITICAL** for Medicare Coverage of Compression Garments
- It's No Longer Enough for the Dx to Appear **ONLY** on the Rx

C If You Plan to Recommend Custom Compression Garments

- Your Plan of Care **MUST** Document One or More Defined Reasons
- Medicare Has Specific Language for Qualifying Conditions

A Meet or Exceed the Medicare Standard for At-Home Maintenance

- 3 Day Garments Per Affected Body Part Every 6 Months
- 2 Night Garments Per Affected Body Part Every 24 Months

B Document Your Recommendations to the Patient

- It **HAS** to Be the Patient's Decision to Do Anything Less
- It is No Longer **SAFE** to Advise the Patient Otherwise
 - Patients Need to Make Their Own Financial Decisions
 - Patients Need to Make Any Choice to Do Less
 - We Have Instituted Payment Plans and a Cost Assistance Program
- This is Now No Different than Failing to Follow an AMA Standard for Care

* It's Always Important to Consult Your Legal Counsel Regarding Compliance & Risk Management Issues.

Scan for Other Time-Saving Ideas
And if you've got questions about documentation or insurance coverage...

Talk to One of Our Experts Anytime...

COMPRESSION CARE



More Information

How to Access More Resources
Big Day of Training

