

South Australia Lymphoedema Compression Garment Scheme

FAQ – Eligibility, Inclusions and exclusions

The purpose of the South Australian Lymphoedema Compression Garment Subsidy Scheme (the Scheme) is to provide eligible South Australians living with lymphoedema with access to up to two subsidised compression garments or adjustable wrap systems per affected body part at least each six months, at no cost.

Eligible people must be assessed by an Approved Prescriber, who will then place an order with the Scheme for the appropriate garments, according to the individual's needs.

Approved Prescribers are registered nurses and allied health therapists who work in lymphoedema or related services and have completed the required training.

Garments and adjustable wrap systems for the Scheme are supplied by a panel of Suppliers of high-quality medical grade compression garments under contract with SA Health.

Eligibility

Subsidies under the Scheme are only available to people who meet all of the following criteria:

- diagnosed with primary or secondary lymphoedema by a Medical Practitioner
- not admitted as an inpatient at a hospital;
- resident of South Australia;
- Medicare eligible; and
- in the past six months have not received two garments through the Scheme for each affected body part;
- are not eligible for garments through other sources/programs, such as National Disability Insurance Scheme, DVA Gold Card, work cover, private health insurance*

* Notes:

- If Private Health Insurance does not include any cover for compression garments, the client will be eligible for the CGSS if all other eligibility criteria are met.
- Where Private Health Insurance provides coverage for compression garments, the client must utilise their health funding before they can apply for consideration under the Scheme.
- Where Private Health Insurance covers compression garments, but the funding has been exhausted, an application can be made to HealthContractNotices@sa.gov.au for consideration. This application should include details of the circumstance to enable a case-by-case assessment to be undertaken. The submission should include:
 - Details regarding the level of cover and the insurer; and
 - Confirmation that private health insurance funding has been exhausted.

The Scheme excludes the following conditions:

- Lipoedema
- Lipodermatosclerosis
- Chronic venous insufficiency
- Post thrombotic syndrome

The Scheme excludes the following items:

- Prophylactic compression garments including flight sleeves
- Structural therapy garments/hernia supports
- Short term use (acute treatment i.e. burns/Split Skin Grafts)
- Anti-embolic stockings
- Doff/Donning aids
- Electrical air compression pumps
- Inelastic or elastic lymphoedema bandages

For more information

SA Health

<http://www.sahealth.sa.gov.au/LymphoedemaScheme>

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