Cost Savings Attributable to the Use of Compression

Rehabilitation Oncology Journal: Effects of Complete Decongestive Therapy on the Incidence Rate of Hospitalization for the Management of Recurrent Cellulitis in Adults with Lymphedema[1]

- Lymphedema was recognized as one of the most potent risk factors for the development of recurrent cellulitis, which frequently requires hospitalization.
- The authors remarked that enrollment in the study removed a significant barrier to idealized treatment by covering the cost of bandages and garments through the study's funding.
- **The study revealed that treatment, primarily consisting of compression including bandaging and custom garments, reduced the average annual hospitalizations among the study participants from 8.5/year down to 0.67/year, a decrease of 12-fold.**

A Ten-Year Review of Compression Coverage in the Commonwealth of Virginia

The following highlights the findings of a ten-year review of Virginia's experience with their state mandate for compression supplies published in the journal *Health Economics Review* in 2016[2]. The mandate applied to private insurance, and later (the last 5 years) to Medicaid and state employees.

- **Visits to providers (physician or therapist)** dropped by over 40% (figure 3 page 5).
- **Hospital days** dropped by over 50% to nearly zero (figure 3, page 6) over the last 5 years. This was for the *privately insured patients only* as Medicare did not report hospital data. Note: Medicare patients would be expected to benefit even more from the mandate as they have a greater financial barrier to compression supplies putting them at higher risk for hospitalization at baseline.
- **Combined hospital days and clinic visits** dropped over the 10 years by an average annual amount of 6% (paragraph 1, page 8).
- ***"The Virginia data confirmed previous clinical data that the treatment of lymphedema by management of swelling results in lower medical costs and fewer hospitalizations"*** (paragraph 5, page 8).

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[1] http://journals.lww.com/rehaboncl/Abstract/2011/29030/Effects_of_Complete_Decongestive_Therapy_on_the.3.aspx
[2] Weiss, R. Health Econ Rev (2016) 6: 42. https://doi.org/10.1186/s13561-016-0117-3