

Medical Coverage Policy

Policy Number – MP21-016E

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Treatment of varicose veins

Background

Varicose veins are abnormally enlarged and tortuous blood vessels that result from the reflux of blood caused by incompetent veins. This reflux causes the veins to dilate which can cause pain and swelling. Most varicose veins are small and respond well to conservative treatment.

Superficial, deep, and perforating veins make up the lower extremity venous system. The superficial veins lie between the deep fascia and the skin, and include the great saphenous, small saphenous, accessory saphenous veins, and their tributaries. Deep veins lie beneath the muscular fascia and are connected to the superficial veins by perforating which penetrate the fascia. Blood flows from the superficial to the deep veins, and incompetent valves at the saphenofemoral and saphenopopliteal junctions can result in varicosities.

Conservative therapy, such as leg elevation, compression stockings, and weight management, offers symptomatic relief to many patients. Non-conservative management essentially involves removal of the varicosities, either surgically, or by thermal or non-thermal ablation.

Policy statement

Disclaimer: This policy is applicable to TRICARE Prime and Select beneficiaries and may not apply to Active Duty Service Members (ADSM) under Supplemental Health Care Program (SHCP) or TRICARE Prime Remote (TPR) in accordance with TRICARE Operations Manual (TOM) Chapter 17, Section 3. Please review TOM Chapter 17, Section 3, Paragraph 2.0 onwards, regarding SHCP coverage and any TRICARE-specific exclusions included in this coverage policy to accurately determine the benefit for ADSMs.

- A.** Surgical removal (ligation and stripping), Endovenous thermal ablation (Radiofrequency or Laser), non-thermal ablation (Sclerotherapy, Cyanoacrylate injection) of varicose veins may be covered if ALL of the following conditions are met:
 - I.** Varicosities involve great saphenous, small saphenous, accessory saphenous veins, or perforator veins
 - II.** Duplex ultrasound performed within the last 12 months shows clinically significant reflux greater than or equal to 500 milliseconds at the saphenofemoral or saphenopopliteal junction of the vein to be treated
 - III.** Vein size is at least 3.5 mm
 - IV.** At least one of the following symptoms are present:
 - a. Haemorrhage from ruptured superficial varicosity
 - b. Venous stasis ulcer
 - c. Failure of a 3 month trial of conservative management (regular use of compression garments providing 20-30 mm Hg pressure, analgesics) AND one of the following:
 - i. Recurrent superficial thrombophlebitis OR

- ii. Severe pain and swelling that causes functional impairment and requires chronic analgesic medication
 - V. No deep vein thrombosis on duplex ultrasound imaging
- B. Stab phlebectomy may be covered if the following conditions are met:**
- I. Superficial tributary varicosities of 3 mm or more
 - II. Performed concurrently or after saphenous vein stripping or ablation
 - III. At least one of the following symptoms are present:
 - a. Haemorrhage from ruptured superficial varicosity
 - b. Venous stasis ulcer
 - c. Failure of a 3 month trial of conservative management (regular use of compression garments providing 20-30 mm Hg pressure, analgesics) AND one of the following:
 - i. Recurrent superficial thrombophlebitis OR
 - ii. Severe pain and swelling that causes functional impairment and requires chronic analgesic medication
 - IV. No deep vein thrombosis on duplex ultrasound imaging
 - V. No overlying infection at site of planned surgery

TRICARE Policy Manual (TPM) Ch. 4, Sec. 9.1

3.7 Endovenous Radiofrequency Ablation (RFA)/obliteration (CPT procedure codes 36475 and 36476) and endovenous laser ablation/therapy (CPT procedure codes 36478 and 36479) for the treatment of saphenous venous reflux of named saphenous veins (which include greater, small, anterior accessory and posterior accessory) with symptomatic varicose veins and/or incompetent perforator veins is covered when:

3.7.1 One of the following indications is present:

3.7.1.1 Persistent symptoms interfering with activities of daily living in spite of conservative/non-surgical management. Symptoms include aching, cramping, burning, itching and/or swelling during activity or after prolonged standing.

3.7.1.2 Significant recurrent attacks of superficial phlebitis.

3.7.1.3 Hemorrhage from a ruptured varix.

3.7.1.4 Ulceration from venous stasis where incompetent varices are a contributing factor.

3.7.2 A trial of conservative, non-operative treatment has failed. This would include mild exercise, avoidance of prolonged immobility, periodic elevation of legs, and compressive stockings.

3.7.3 The patient's anatomy is amenable to endovenous ablation.

Coding information

36465	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; single incompetent extremity truncal vein (eg, great saphenous vein, accessory saphenous vein)
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36466	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; multiple incompetent truncal veins (eg, great saphenous vein, accessory saphenous vein), same leg
36468	Injection(s) of sclerosant for spider veins (telangiectasia), limb or trunk - Not Covered
36470	Injection of sclerosant; single incompetent vein (other than telangiectasia)
36471	Injection of sclerosant; multiple incompetent veins (other than telangiectasia), same leg
36473	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; first vein treated
36474	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)
36475	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; first vein treated
36476	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)
36478	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; first vein treated
36479	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)
36482	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; first vein treated
36483	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)
37500	Vascular endoscopy, surgical, with ligation of perforator veins, subfascial (SEPS)
37718	Ligation, division, and stripping, short saphenous vein

37722	Ligation, division, and stripping, long (greater) saphenous veins from saphenofemoral junction to knee or below
37735	Ligation and division and complete stripping of long or short saphenous veins with radical excision of ulcer and skin graft and/or interruption of communicating veins of lower leg, with excision of deep fascia
37760	Ligation of perforator veins, subfascial, radical (Linton type), including skin graft, when performed, open, 1 leg
37761	Ligation of perforator vein(s), subfascial, open, including ultrasound guidance, when performed, 1 leg
37765	Stab phlebectomy of varicose veins, 1 extremity; 10-20 stab incisions
37766	Stab phlebectomy of varicose veins, 1 extremity; more than 20 incisions
37780	Ligation and division of short saphenous vein at saphenopopliteal junction (separate procedure)
37785	Ligation, division, and/or excision of varicose vein cluster(s), 1 leg

References

1. TRICARE Policy Manual Chapter 4, Section 9.1 [TRICARE Manuals - Display Chap 4 Sect 9.1 \(Change 41, Aug 15, 2025\)](#)
2. MCG Health. Saphenous Vein Ablation, Radiofrequency. Ambulatory Care. 29th edition. ACG: A-0174 (AC). Last reviewed: 06/13/2025
3. MCG Health. Saphenous Vein Ablation, Laser. Ambulatory Care. 29th edition. ACG: A-0425 (AC). Last reviewed: 06/13/2025
4. MCG Health. Stab Phlebectomy. Ambulatory Care. 29th edition. ACG: A-0735 (AC). Last reviewed: 06/13/2025
5. MCG Health. Sclerotherapy, Leg Veins. Ambulatory Care. 29th edition. ACG: A-0170 (AC). Last reviewed: 06/13/2025
6. MCG Health. Saphenous Vein Ablation, Adhesive Injection. Ambulatory Care. 29th edition. ACG: A-1024 (AC). Last reviewed: 06/13/2025
7. Symplr Evidence Analysis. Cyanoacrylate embolization (VenaSeal Closure System) for the treatment of varicose veins. Updated: 10/18/2024
8. Centers for Medicare and Medicaid Services. Local Coverage Determination (LCD) L38720. Treatment of Chronic Venous Insufficiency of the Lower Extremities. Effective Date 12/27/2020
9. Centers for Medicare and Medicaid Services. Local Coverage Article. A58250 Billing and Coding: Treatment of Chronic Venous Insufficiency of the Lower Extremities. Effective Date 01/01/2025
10. American Vein and Lymphatic Society. Position Statement. Cyanoacrylate venous closure. myavls.org. Updated 06/18/2024.

Revision history

September 2025: Updated references

August 2024:

- Updated references

August 2023:

- Updated references and coding

Approved by:



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