Southern Cross Health Insurance

Eligibility criteria for the treatment of varicose veins (legs) - effective from 11 January 2027

Southern Cross will only reimburse the cost of the treatment of varicose veins (legs) under a member's policy when criteria **1, 2 and 3** below are met for that member.

This applies to procedures including varicose vein surgery, ultrasound-guided sclerotherapy (UGS), endovenous laser treatment (EVLT), radiofrequency ablation (RFA/VNUS), and cyanoacrylate closure (eg VenaSeal).

1. The member must have clinically significant chronic venous disease, defined as:

- CEAP (Clinical, Etiologic, Anatomic, Pathophysiologic) clinical classification of C2s or higher.

AND

- Venous Clinical Severity Score (VCSS) greater than or equal to 5.

AND

- Symptoms must be attributable to venous insufficiency, impact critical activities of daily function or quality of life and not explained by an alternative diagnosis.

2. Objective evidence of venous insufficiency - a duplex ultrasound must demonstrate pathological venous reflux, defined as one or more of the following:

- Superficial truncal vein reflux: reversed (retrograde) flow of >0.5 seconds in a superficial truncal vein, including the great saphenous vein, small saphenous vein, anterior accessory saphenous vein, posterior accessory saphenous vein, or another clinically relevant superficial truncal vein.

OR

- Deep vein reflux: reversed (retrograde) flow of >1.0 second in the common femoral, femoral, or popliteal vein.

OR

- Perforator reflux: a perforating vein measuring ≥3.5 mm in diameter with outward reflux >0.5 seconds.

3. A duplex ultrasound and venous map must be performed and retained, demonstrating the:

- anatomical distribution and extent of reflux.
- veins affected (including identification of relevant truncal and/or perforator veins).
- anatomical correlation between the reflux identified and the member's symptoms.

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Documentation requirements

Supporting documentation must be retained for audit purposes and demonstrate compliance with the above criteria. This must include a clinical assessment documenting symptoms attributable to chronic venous disease and their impact on function or quality of life, CEAP clinical classification, VCSS, a duplex ultrasound report, and a venous map sufficient to demonstrate the required severity of disease, objective evidence of venous insufficiency, and anatomical distribution of reflux.

Please also ensure you are familiar with all **policy exclusions**, including:

- Acute care
- Congenital conditions
- Cosmetic treatment/procedures
- Health screening
- Treatment of any condition not detrimental to health
- Unapproved healthcare services.

Refer to the relevant policy document for specific conditions and exceptions that apply to these exclusions.