

CHAMPVA POLICY MANUAL

CHAPTER: 2
SECTION: 20.18
TITLE: PSYCHOSURGERY

AUTHORITY: 38 USC 1713; 38 CFR 17.270(a) and 17.272(a)

RELATED AUTHORITY: 32 CFR 199.4(g)(15)

TRICARE POLICY MANUAL: Chapter 3, Section 15.14

I. EFFECTIVE DATE

January 23, 1984

II. PROCEDURE CODE(S)

64999

III. DESCRIPTION

Psychosurgery is brain surgery directed at destroying normal and healthy brain tissue in order to relieve mental and psychic symptoms that other treatment modalities such as drug therapy and psychotherapy have been ineffectual in treating, for the purpose of changing or controlling behavior or emotions.

IV. POLICY

Psychosurgery is not in accordance with accepted professional medical standards and is not covered. Additionally, all services and supplies when determined to be related or integral to the psychosurgery procedure are excluded from coverage.

V. POLICY CONSIDERATIONS

Brain surgery directed at repairing damaged brain tissue or alleviating symptoms resulting from brain tumors, accidents, infections, epilepsy, aneurysms, congenital anomalies, or any other physical disorder where the cause of the brain impairment is clear, is not considered psychosurgery, and may be considered for cost-sharing when determined to be medically necessary.

END OF POLICY