

**Department of  
Veterans Affairs**

**MEMORANDUM**

Date posted \_\_\_\_\_ Initials \_\_\_\_\_

May 4, 2001

Division Chief, Office of Policy and Compliance

Transmittal #37, CHAMPVA Policy Manual

See Transmittal Distribution List

1. Explanation of changes to subject policy manual, related index updates and filing instructions are contained in the following summary:

<u>Summary</u>	<u>REMOVE</u> <u>C-S</u>	<u>Pages</u>	<u>INSERT</u> <u>C-S</u>	<u>Pages</u>
<b><u>CHAPTER</u></b>				
<a href="#">Chapter 2, Section 4.1</a> , <i>Cardiovascular System</i> . Adds procedure codes 64818, 92950-93744, 93770, 93797-93799.	2-4.1	1-5	2-4.1	1-5
<a href="#">Chapter 2, Section 4.6</a> , <i>Percutaneous Transluminal Angioplasty (PTA)</i> . Adds procedure codes 75962, 75964, 75966, 75968, 92982 and 92984; and deletes procedure codes 75963 and 75965.	2-4.6	1-2	2-4.6	1-2
<a href="#">Chapter 2, Section 6.1</a> , <i>Digestive System</i> . Adds procedure codes 96570 and 96571; and deletes procedure codes 56300-56344, 56362-56363, and 56399.	2-6.1	1-6	2-6.1	1-6
<a href="#">Chapter 2, Section 7.3</a> , <i>Cochlear Implantation</i> . Amends policy to provide coverage for cochlear implantation from 12 months of age.	2-7.3	1-3	2-7.3	1-3
<a href="#">Chapter 2, Section 10.6</a> , <i>Ophthalmological Services</i> . Clarifies policy for a helpless child under age seven that has a visual impairment; and removes requirement for preauthorization.	2-10.6	1-2	2-10.6	1-2

<u>Summary</u>	REMOVE		INSERT	
	<u>C-S</u>	<u>Pages</u>	<u>C-S</u>	<u>Pages</u>
<a href="#">Chapter 2, Section 11.4</a> , <i>Therapeutic Apheresis Therapy</i> . Adds procedure code 36521.	2-11.4	1-3	2-11.4	1-3
<a href="#">Chapter 2, Section 16.5</a> , <i>Experimental/Investigational (Unproven) Procedures</i> . Adds exclusions for magnetic resonance imaging (MRI) of the breast for differential diagnosis of a breast lesion to avoid biopsy; magnetic stimulation for treatment of urinary incontinence in adults; positron emission tomography (PET) used for the treatment of malignant melanoma; uterine artery embolization for treatment of uterine fibroids. Also, adds exclusion for high-dose chemotherapy with allogeneic stem cell support for relapse or incomplete remission following high-dose chemotherapy with autologous stem cell support for the following conditions: intermediate or high-grade non-Hodgkin's lymphoma, Hodgkin's disease, acute myeloid leukemia, or acute lymphoblastic leukemia.	2-16.5	1-13	2-16.5	1-13
<a href="#">Chapter 2, Section 16.7</a> , <i>Podiatry</i> . Corrects TRICARE Policy Manual reference.	2-16.7	1-5	2-16.7	1-5
<a href="#">Chapter 2, Section 18.13</a> , <i>Economic Interest In Connection with Mental Health Admissions</i> . Corrects titles of hyperlinked policies.	2-18.13	1-2	2-18.13	1-2
<a href="#">Chapter 2, Section 20.10</a> , <i>Destruction of Nerve By Radiofrequency Thermoneurolysis</i> . Removes reference to TRICARE Policy Manual; and corrects hyperlink.	2-20.10	1-2	2-20.10	1-2
<a href="#">Chapter 2, Section 22.5</a> , <i>Botulinum Toxin A Injections</i> . Adds coverage for axillary hyperhidrosis.	2-22.5	1-2	2-22.5	1-2
<a href="#">Chapter 2 Section 23.3</a> , <i>Immunization Injections</i> . Adds procedure codes 90378, 90476, and 90633.	2-23.3	1-7	2-23.3	1-7
<a href="#">Chapter 2, Section 27.1</a> , <i>Integumentary System</i> . Deletes reference to modifier 22.	2-27.1	1-6	2-27.1	1-6
<a href="#">Chapter 2, Section 30.2</a> , <i>Occupational Therapy</i> . Adds procedure codes 97535 and 97799.	2-30.2	1-3	2-30.2	1-3

<u>Summary</u>	<u>REMOVE</u>		<u>INSERT</u>	
	<u>C-S</u>	<u>Pages</u>	<u>C-S</u>	<u>Pages</u>
<a href="#">Chapter 2, Section 30.5, Biofeedback.</a> Adds procedure codes 90901 and 90911; deletes procedure codes 90900, 90902, 90904, 90906, 90908, 90910, and 90915; and adds exclusion for treatment of migraine headaches.	2-30.5	1-3	2-30.5	1-3
<a href="#">Chapter 2, Section 30.13, Stereotactic Radiosurgery/Radiotherapy.</a> Adds procedure codes 61795, 77427, 77431, and 77520-77523; and deletes procedure codes 77380 and 77381.	2-30.13	1-4	2-30.13	1-4
<a href="#">Chapter 2, Section 33.1, Urinary System.</a> Adds procedure code 52400. Deletes procedure code 52340 and replaces with code 52400; and adds coverage for sacral nerve stimulation for the treatment of urinary urgency/frequency.	2-33.1	1-4	2-33.1	1-4
<a href="#">Chapter 2, Section 35.1, Female Genital System.</a> Adds procedure codes 11980, 56405-58301, 58340, 58345, 58350, 58400-58673, 58679, 58800; and deletes procedure codes 56301-56309 and 58551; and provides clarification of codes related to excluded services.	2-35.1	1-3	2-35.1	1-3
<a href="#">Chapter 2, Section 36.1, Male Genital System.</a> Adds exclusion for intersex surgery, except when performed to correct sex gender confusion/ambiguous genitalia, which is documented to have been present at birth.	2-36.1	1-3	2-36.1	1-4

### **Related Index Updates**

<b>Subject Index.</b> Modified to update and include policies referenced in this transmittal.	H	1-4	H	1-4
	I	1-10	I	1-9
	M	1-5	M	1-5
<b>Codes Index.</b> Amends index to add and delete codes referenced in policies. Changes are highlighted in the index for reference purposes.	1-25		1-25	

3. File this transmittal memorandum in the front of the CHAMPVA Policy Manual.

Susan Schmetzer  
Division Chief, Policy & Compliance

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