

**Department of  
Veterans Affairs**

**MEMORANDUM**

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

August 20, 2002

Chief, Policy and Compliance Division

Transmittal #47 CHAMPVA Policy Manual

See Transmittal Distribution List

1. Explanation of changes and related index updates of the CHAMPVA Policy Manual and filing instructions are in the following summary:

| <u>SUMMARY</u>   | <u>REMOVE</u> |              | <u>INSERT</u> |              |
|--|---------------|--------------|---------------|--------------|
|  | <u>C-S</u>    | <u>Pages</u> | <u>C-S</u>    | <u>Pages</u> |
| <b>Master Table of Contents.</b><br>Changes title of policy Chapter 2, Section 4.7, <i>Radiofrequency Catheter Ablation of Aberrant Conducting Pathways of the Heart</i> to <i>Ablation Of Aberrant Conducting Pathways of the Heart</i> ; changes title of Chapter 2, Section 4.8, <i>Transtelephonic Monitoring</i> to <i>Transtelephonic Monitoring of Pacemakers</i> ; deletes policy, Chapter 2, Section 4.10, <i>Thrombolytic Agents</i> ; and adds new policy to Chapter 3, Section 5.11, <i>Pharmacy Reimbursement</i> . | MTOC          | 1-19         | MTOC          | 1-18         |
| <b><u>Chapter 2, Table of Contents.</u></b><br>Changes title of policy Chapter 2, Section 4.7, <i>Radiofrequency Catheter Ablation of Aberrant Conducting Pathways of the Heart</i> , to <i>Ablation Of Aberrant Conducting Pathways of the Heart</i> and changes title of Chapter 2, Section 4.8, <i>Transtelephonic Monitoring</i> to <i>Transtelephonic Monitoring of Pacemakers</i> ; deletes policy Chapter 2, Section 4.10, <i>Thrombolytic Agents</i> .   | TOC           | 2-13         | TOC           | 2-13         |
| <b><u>Chapter 2, Section 2.7.</u></b> <i>Stereotaxic (Stereotactic) Breast Biopsy</i> . Amends CPT codes.  | 2-2.7         | 1-2          | 2-2.7         | 1-2          |

| <u>SUMMARY</u>  | <u>REMOVE</u> |              | <u>INSERT</u> |              |
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|   | <u>C-S</u>    | <u>Pages</u> | <u>C-S</u>    | <u>Pages</u> |
| <a href="#"><u>Chapter 2, Section 4.7</u></a> , <i>Ablation of Aberrant Conducting Pathways of the Heart</i> . Changes policy title; removes from Policy the statement that all patients should undergo a complete cardiologic evaluation and thorough electrophysiologic evaluation prior to radiofrequency catheter ablation therapy. | 2-4.7         | 1-2          | 2-4.7         | 1-2          |
| <a href="#"><u>Chapter 2, Section 4.8</u></a> , <i>Transtelephonic Monitoring for Pacemakers</i> . Changes policy title; removes from Policy the guidelines for transtelephonic monitoring of pacemakers prior to payment; and under Description and Policy Considerations contents are slightly modified for clarity.                  | 2-4.8         | 1-3          | 2-4.8         | 1-2          |
| <a href="#"><u>Chapter 2, Section 4.10</u></a> , <i>Thrombolytic Agents</i> . Policy is deleted.  | 2-4.10        | 1-1          |               |              |
| <a href="#"><u>Chapter 2, Section 6.1</u></a> , <i>Digestive System</i> . Amends CPT codes; removes reimbursement guidelines from Policy Considerations; and adds clarity to Exclusions.  | 2-6.1         | 1-6          | 2-6.1         | 1-1          |
| <a href="#"><u>Chapter 2, Section 16.5</u></a> , <i>Experimental/ Investigational (Unproven) Procedures</i> . Removes from Policy Considerations lung volume reduction therapy for any indication and OrthoLogic 1000 bone growth stimulator.   | 2-16.5        | 1-6          | 2-16.5        | 1-6          |
| <a href="#"><u>Chapter 2, Section 23.1</u></a> , <i>Preventive Services</i> . Amends CPT codes and under Exceptions adds genetic testing for sickle cell anemia.  | 2-23.1        | 1-7          | 2-23.1        | 1-6          |
| <a href="#"><u>Chapter 2, Section 25.1</u></a> , <i>Respiratory System</i> . Amends CPT code ranges; adds to Policy Considerations codes 31623, and 43231-43232; and adds Exclusions for lung   | 2-25.1        | 1-2          | 2-25.1        | 1-2          |

**SUMMARY**

| <b>REMOVE</b>     |                     | <b>INSERT</b>     |                     |
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| <b><u>C-S</u></b> | <b><u>Pages</u></b> | <b><u>C-S</u></b> | <b><u>Pages</u></b> |

volume reduction surgery.

**Chapter 2, Section 26.9**, *Positron Emission Tomography (PET)*. Adds to Effective Date January 1, 2002, FDG PET with gamma cameras for colorectal or colorectal metastatic cancer, lymphoma, and melanoma; April 1, 2002, FDG PET imaging whole body for lung cancer, non-small cell, colorectal cancer, melanoma, head and neck cancer (excluding thyroid and CNS cancers, esophageal cancer, pre-surgical evaluation of refractory seizures; October 1, 2002, FDG PET full- and partial-ring scanners for determination of myocardial viability as a primary or initial diagnostic study before revascularization and following an inconclusive SPECT study; amends HCPCS codes range; and adds to Policy coverage FDG PET for determination of myocardial viability; FDG PET imaging whole body, and whole body PET imaging performed with gamma cameras.

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| 2-26.9 | 1-3 | 2-6.9 | 1-4 |
|--------|-----|-------|-----|

**Chapter 2, Section 27.1**, *Integumentary System*. Amends CPT code range; under Policy Considerations removes reimbursement guidelines; and adds to Exclusions the removal of benign lesions/tumors for cosmetic purposes.

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| 2-27.1 | 1-6 | 2-27.1 | 1-5 |
|--------|-----|--------|-----|

**Chapter 2, Section 29.8**, *Laser Surgery*. Amends CPT code range; adds Definition for age-related macular degeneration (AMD); under Policy adds coverage for ocular photodynamic therapy for wet age-related macular degeneration (AMD); removes reimbursement guidelines; under Exclusions adds ocular photodynamic therapy for dry AMD.

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| 2-29.8 | 1-4 | 2-29.8 | 1-4 |
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|   | <u>C-S</u>                 | <u>Pages</u> | <u>C-S</u>                 | <u>Pages</u> |
| <a href="#">Chapter 2, Section 32.1</a> , <i>Ambulance Services</i> . Amends HCPCS code range.  | 2-32.1                     | 1-3          | 2-32.1                     | 1-3          |
| <a href="#">Chapter 2, Section 33.2</a> , <i>Bladder Stimulators</i> . Under Policy adds that the use of bladder stimulators, such as a spinal cord, rectal and vaginal electrical stimulator, or bladder wall stimulators are a covered benefit when the device is FDA approved. | 2-33.2                     | 1-1          | 2-33.2                     | 1-1          |
| <a href="#">Chapter 3, Table of Contents</a> . Adds new policy, Chapter 3, Section 5.11, <i>Pharmacy Reimbursement</i> .  | TOC                        | 3-3          | TOC                        | 3-3          |
| <a href="#">Chapter 3, Section 5.11</a> , <i>Pharmacy Reimbursement</i> . New policy that provides information regarding pharmacy reimbursement.  |                            |              | 3-5.11                     | 1-3          |
| <b>Subject Index.</b> Amended to update and include policies referenced in this transmittal.  | P-1 thru P-8<br>T1 thru T5 |              | P-1 thru P-8<br>T1 thru T5 |              |
| <b>Codes Index.</b> Amends index to add and delete codes referenced in policies. Changes are highlighted in the index for reference purposes.   | 1-26                       |              | 1-27                       |              |

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

Susan Schmetzer  
Chief, Policy & Compliance

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