

CHAMPVA POLICY MANUAL

CHAPTER: 2
SECTION: 36.1
TITLE: MALE GENITAL SYSTEM

AUTHORITY: 38 CFR 17.270(a) and 17.272(a)

RELATED AUTHORITY: 32 CFR 199.4(c)(2), (c)(3), (e)(3)(i), (B)(4), (e)(7), and (e)(8)(i)(E)

I. EFFECTIVE DATE

- A. February 1, 1988, for penile implants.
- B. August 13, 1990, for testicular prosthesis.
- C. March 11, 1996, for transurethral ultrasound-guided laser induced prostatectomy (TULIP).
- D. May 6, 1996, for prostatron, thermourethral microwave (TUMT).

II. PROCEDURE CODE(S)

53850-53853, 54000-54235, 54300-54390, 54420-54650, 55970-55980, and 99211

III. DESCRIPTION

The male genital system includes the male organs of reproduction.

IV. DEFINITION

Organic impotence is defined as that which can be reasonably expected to occur following certain diseases, surgical procedures, trauma, injury, or congenital malformation. Impotence does not become organic because of psychological or psychiatric reasons.

V. POLICY

- A. Medically necessary services and supplies required in the diagnosis and treatment of illness or injury involving the male genital system are covered.

B. A vasectomy, unilateral or bilateral, performed, as an independent procedure is a covered service.

VI. POLICY CONSIDERATIONS

A. Diagnostic studies necessary to establish organic versus psychogenic impotence, such as lab work, a psychiatric evaluation, Doppler ultrasound, arteriography, cavernosography, cavernosometry, or electrophysiological testing may be cost shared.

B. Treatment of organic impotency is covered subject to all applicable provisions of other basic program benefits.

1. Penile Implant.

a. Insertion of an FDA-approved penile implant is covered when performed for organic impotence that has resulted from a disease process, trauma, radical surgery, or for correction of a congenital anomaly, or for correction of sex gender confusion/ambiguous genitalia, which is documented to have been present at birth.

b. Removal and reinsertion of covered penile implants and associated surgical fees may be cost shared.

2. Hormone injection, non-injectable delivery system or intracavernosal injection for the treatment of organic impotency, may be cost shared providing the drugs are FDA approved and usage is considered generally accepted medical practice.

3. External vacuum appliance for the treatment of organic impotency may be cost shared providing the external appliance is FDA approved and usage is considered generally accepted medical practice.

4. Treatment of organic male impotence may be covered only after thorough evaluation has been documented by the physician.

a. Prescribed medications (e.g., Viagra, Levitra, and Cialis) by physicians treating male patients diagnosed with organic impotence, may be cost shared when the physician has considered the medication as the most optimal regime for the patient.

b. Dispensing of prescribed medications must adhere to established clinical guidelines.

c. "Lost", "stolen", or "destroyed" tablets will not be replaced.

5. Aortoiliac reconstruction, endarterectomy, and arterial dilatations for proximal lesions for the treatment of organic impotency may be cost shared.

C. Insertion of an FDA approved testicular prosthesis is covered when performed following disease, trauma, injury, radical surgery, or for correction of a congenital anomaly, or for correction of sex gender confusion/ambiguous genitalia, which is documented to have been present at birth.

D. Infertility testing and treatment, including correction of the physical cause of infertility may be cost shared. Hypothalamic disease, pituitary disease, disorders of sperm transport, disorders of sperm motility or function, and/or sexual dysfunction may cause male infertility. Diagnostic services may include semen analysis, hormone evaluation, chromosomal studies, immunologic studies, special and sperm function tests, and/or bacteriologic investigation. Therapy may include, but is not limited to, hormonal treatment, surgery, antibiotics, administration of human chorionic gonadotropin (HCG), and/or radiation therapy, depending upon the cause.

E. For information concerning an implantable urethral sphincter, see [Chapter 2, Section 33.1](#), *Urinary System*.

VII. EXCLUSIONS

A. Penile implants and related services when performed for psychological impotence, transsexualism, or such other conditions as gender dysphoria. [38 CFR 17.272 (a)(83)]

B. Testicular Prosthesis. Insertion of a testicular prosthesis and related services when performed for transsexualism or such other conditions as gender dysphoria. [38 CFR 17.272 (a)(23)]

C. Therapy for sexual dysfunctions or inadequacies (see [Chapter 2, Section 16.10](#), *Sexual Dysfunctions, Paraphilias and Gender Identity Disorders*). [38 CFR 17.272 (a)(24)]

D. Prophylactics (condoms). [38 CFR 17.272 (a)(29)]

E. The reversal of a voluntary surgical sterilization procedure. [38 CFR 17.272 (a)(27)]

F. Artificial insemination including any cost related to donors and semen banks. [38 CFR 17.272 (a)(28)]

G. The treatment of organic impotency by arterial revascularization for distal lesions and venous leakage.

H. Nocturnal penile tumescent testing by plethysmography and other monitoring devices used in the home (see [Chapter 2, Section 34.1](#), *Non-Invasive Vascular Diagnostic Studies: Extremity Arterial Studies (including digits)*).

- I. Arterial revascularization for distal lesions and venous leakage when treatment is for organic impotency.
- J. Sperm evaluation; hamster penetration test.
- K. Intersex surgery except when performed to correct sex gender confusion/ambiguous genitalia, which is documented to have been present at birth (see [Chapter 2, Section 29.6, Intersex Surgery](#)).
- L. Cryosurgery for prostate metastases.

END OF POLICY