

**Department of
Veterans Affairs**

MEMORANDUM

Date posted _____ Initials _____

December 11, 2003

Chief, Policy and Compliance Division

Transmittal #65 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>
<u>Chapter 2, Section 12.1</u> , <i>Well-Child Care</i> . Adds to Description that well-child care services are those provided in accordance with the American Academy of Pediatrics (AAP) guidelines and adds to Policy Considerations that the services are considered preventive and subject to the same beneficiary cost share and copayments as those provided under the <i>Preventive Services</i> policy.	2-12.1	1-5	2-12.1	1-5
<u>Chapter 2, Section 15.3</u> , <i>Home Visits</i> . Removes CPT codes under Exclusion A as these codes are payable when not performed in the home.	2-15.3	1-2	2-15.3	1-2
<u>Chapter 2, Section 29.2</u> , <i>Assistant Surgeons</i> . Adds to Description certified nurse practitioners.	2-29.2	1-2	2-29.2	1-2
<u>Chapter 2, Section 30.1</u> , <i>Physical Medicine/Therapy</i> . Adds to Exclusions the use of functional electrical stimulation for rehabilitation of paralyzed lower limbs.	2-30.1	1-17	2-30.1	1-17
<u>Chapter 3, Section 3.1</u> , <i>Catastrophic Cap</i> . Removes 38 USC 1713 Authority reference and under Effective Date revises policy format.	3-3.1	1-3	3-3.1	1-3

<u>SUMMARY</u>	REMOVE		INSERT	
	<u>C-S</u>	<u>Pages</u>	<u>C-S</u>	<u>Pages</u>
<u>Chapter 3, Section 4.1</u> , <i>Other Health Insurance (OHI)</i> . Adds to Definitions OHI Write-Offs/Discounts; under Policy clarifies that OHI also includes Medicare; provides an example of the OHI member failing to meet their OHI requirement and that CHAMPVA will deny payment in those situations; clarifies last pay limitations; adds Note describing a provider participating agreement of provider discounts and write-offs; provides guidance for appeal of Medicare medical necessity decisions; and adds Note concerning beneficiary out-of-pocket expense.	3-4.1	1-9	3-4.1	1-9
<u>Chapter 3, Section 5.1</u> , <i>Outpatient and Inpatient Professional Provider Reimbursement</i> . Under Policy amends provider class codes for certain providers and under Policy Considerations adds clarification to discounted fees/write-offs.	3-5.1	1-5	3-5.1	1-5
<u>Chapter 3, Section 5.9</u> , <i>Surgery Reimbursement</i> . Removes 38 USC 1713 Authority reference and TRICARE Policy Manual reference; under Effective Dates(s) revises paragraph numbering and adds September 1, 2003, for certified nurse practitioners; under Definitions adds certified nurse practitioner as an assistant surgeon; and under Policy adds billing procedures for the certified nurse practitioner.	3-5.9	1-4	3-5.9	1-4
<u>Chapter 3, Section 6.1</u> , <i>Skilled Nursing Facility (SNF) Reimbursement</i> . Under Reimbursement adds clarification of claims involving other health insurance (OHI).	3-6.1	1-3	3-6.1	1-3
<u>Chapter 3, Section 6.3</u> , <i>Cost-To-Charge (CTC) Reimbursement System</i> . Under Policy adds that effective August 1, 2003, all services related to combined liver-kidney and combined heart-kidney transplant will be paid under the assigned DRG and removes blood clotting factors prior to October 1, 2000.	3-6.3	1-7	3-6.3	1-6

SUMMARY

REMOVE **INSERT**
C-S **Pages** **C-S** **Pages**

Subject Index. Amended to update and
Include policies referenced in this transmittal.

D - 1 thru D -7	D - 1 thru D - 7
E - 1 thru E - 7	E - 1 thru E - 7
N - 1 thru N - 3	N - 1 thru N - 3
P - 1 thru P -12	P - 1 thru P - 13
W -1 thru W - 2	W -1 thru W - 2

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

Susan Schmetzer
Chief, Policy & Compliance

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