

DIGESTIVE SYSTEM

ISSUE DATE: August 26, 1985

AUTHORITY: 32 CFR 199.4(c)(2) and (c)(3)

I. CPT¹ PROCEDURE CODES

40490 - 40831, 40899 - 43644, 43647, 43648, 43651 - 43761, 43800, 43810, 43820, 43842, 43846, 43848, 43880 - 43882, 43999, 44005 - 47362, 47371, 47379, 47381, 47399 - 49999, 91123, 96570, 96571

II. DESCRIPTION

The digestive system involves the organs associated with the ingestion, digestion, and absorption of nutrients, and the elimination of solid waste.

III. POLICY

A. Services and supplies required in the diagnosis and treatment of illness or injury involving the digestive system are covered.

B. Gastric electrical stimulation (CPT¹ procedure codes 43647, 43648, 43881, and 43882) for treatment of symptoms of nausea and vomiting from chronic gastroparesis that is refractory to medical management may be considered for coverage as a Humanitarian Use Device (HUD).

IV. EXCLUSIONS

A. Vestibuloplasty except for adjunctive care (CPT¹ procedure code range 40840-40845).

B. Percutaneous interstitial thermal ablation in the treatment of hepatic cancer is unproven.

C. The Stretta System (Curon Medical, Sunnyvale, CA) and Bard Endoscopic Suturing System for the treatment of refractory gastroesophageal reflux disease (GERD) is unproven (CPT¹ procedure codes 43201 and 43257).

¹ CPT only © 2006 American Medical Association (or such other date of publication of CPT). All Rights Reserved.

TRICARE POLICY MANUAL 6010.54-M, AUGUST 1, 2002

CHAPTER 4, SECTION 13.1

DIGESTIVE SYSTEM

D. For bariatric procedures, see [Section 13.2](#).

- END -