



# Using the Medicare Coverage Database: How to Find Important Medicare Coverage Information

7/30/2025





2682\_7/30/2025

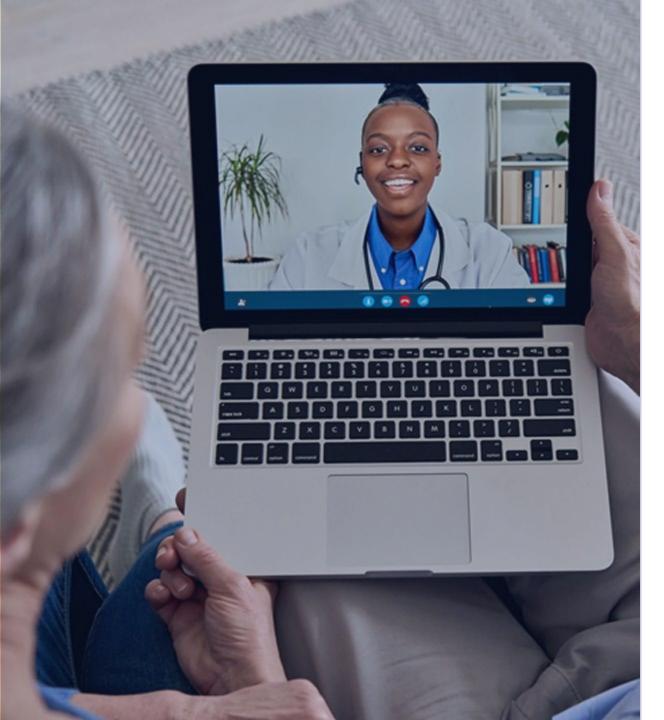


### Disclaimer

National Government Services, Inc. has produced this material as an informational reference for providers furnishing services in our contract jurisdiction. National Government Services employees, agents, and staff make no representation, warranty, or guarantee that this compilation of Medicare information is error-free and will bear no responsibility or liability for the results or consequences of the use of this material. Although every reasonable effort has been made to assure the accuracy of the information within these pages at the time of publication, the Medicare Program is constantly changing, and it is the responsibility of each provider to remain abreast of the Medicare Program requirements. Any regulations, policies and/or guidelines cited in this publication are subject to change without further notice. Current Medicare regulations can be found on the <u>CMS website</u>.







### Recording

Attendees/providers are never permitted to record (tape record or any other method) our educational events. This applies to webinars, teleconferences, live events and any other type of National Government Services educational events. This includes the use of Al-assistant recording tools.

### Objective

Learn how to access important Medicare coverage information using our website and the CMS Medicare Coverage Database



### Today's Presenters

- Provider Outreach and Education Consultants
  - Jeanine Gombos, LPN
  - Andrea Freibauer







### Agenda

- <u>Understanding Medicare</u> <u>Coverage</u>
- <u>National Coverage</u> <u>Determinations</u>
- <u>Local Coverage</u> <u>Determinations</u>
- <u>Accessing Coverage</u> <u>Information</u>
- <u>Resources & References</u>
- <u>Questions</u>





### **Understanding Medicare Coverage**

### **Understanding Medicare Coverage**

"As a health care provider, you should understand Medicare coverage before providing services or items to Medicare patients."

MLN® Educational Tool: <u>How to Use the Medicare Coverage</u> <u>Database</u>





### **Determining Covered Services**

- CMS IOM Publications
  - <u>100-02, Medicare Benefit Policy Manual</u>
    - Contains details on scope of covered Part A and Part B services
  - <u>100-03, Medicare National Coverage Determination (NCD) Manual</u>
    - Sets policy for determining medical necessity for specific services
- Medicare Coverage Database
  - NCDs
  - LCDs





### National Coverage Determinations

### NCD

- CMS national decision concerning specific service(s) that Medicare will or will not cover
  - Implemented nationally
  - Doesn't vary by location
  - Applies to all Medicare providers and contractors





## Locating NCDs

- NCDs published on CMS website under assigned numeric identifier
  - CMS Medicare Coverage Database
    - NCD alphabetical index and chapter/section index
  - CMS IOM Publication 100-03, National Coverage Determinations
     Manual
    - Organized into four "parts" based on NCD numeric identifier
  - New or revised NCDs "announced" via CRs and instructions manualized in applicable sections of IOMs





### **NCD-Automated Edits**

- NCDs enforced by *automated* claims processing system edits
- MACs receive implementation instructions prior to NCD enforcement and notify provider community
- Claims denied when they do not pass system edits for NCDs





### NCD-Related Claim Denials

Reason Code	Description
52NCD	Line level reason code to indicate that the HCPCS code and a diagnosis code on the claim matched an NCD edit table list to deny codes.
53NCD	All the line items on the claim have units of service that are in excess of the medically reasonable daily allowable frequency. The excess charges due to units of service greater than the maximum allowable may not be billed to the beneficiary and this provision can neither be waived nor subject to an ABN.
54NCD	Line level reason code to indicate that none of the diagnosis codes on the claim support the medical necessity of the services. Service denied and the provider is liable.





## Avoiding NCD-Related Claim Denials

- Ensure all Medicare coverage and medical necessity requirements met before billing
- If Medicare will not cover services, consider submitting charges as noncovered
- Visit <u>Medicare Coverage Database</u> to review NCDs and LCDs to determine covered diagnosis for services provided
- Review <u>Submit an Adjustment to Correct Claims Partially</u>
   <u>Denied by Automated LCD-NCD Denials</u>





# Local Coverage Determinations

### LCD

- Policy decision made by MAC concerning whether to allow coverage of particular item/service
  - Only applies to services within that MAC's jurisdiction
  - Varies in language or implementation





### Benefits of LCDs

- Assist providers to submit correct claims for payment
  - Administrative and educational tools
- Help define Medicare coverage limitations for certain services
- Help reviewers to make consistent, accurate coverage decisions

NCDs always supersede LCDs;

LCD may expand/clarify coverage and coding for NCD





### How Are LCDs Developed?

- MACs develop LCDs on as-needed basis when they
  - Determine that item or service should not be covered under certain circumstances
  - Discover problem that demonstrates significant risk to Medicare trust fund
  - Detect overutilization or misuse of items or services
  - Receive request from external parties (beneficiaries, providers, or manufacturers)





### LCD Components

- Consistent format includes the following sections:
  - Contractor information
  - CMS National Coverage Policy
  - CMS Publications
  - Coverage guidance
  - Summary of Evidence and Analysis of Evidence
  - General information
  - Revision history
  - Associated documents





## **Billing and Coding Articles**

- Include important coding guidelines and billing instructions not related to medical necessity
- Each LCD has at least one related article
- Article link(s) found in Associated Documents section at bottom of LCD
  - Links only "live" in active LCDs and articles
  - Link to related LCD found at end of each article





### LCD Automated Edits

- LCDs supported and enforced by automated system edits
  - 55A00, 55A01 "This claim was denied by an automated system for not having a covered diagnosis in accordance with an LCD"
- Provider can correct diagnosis by submitting
  - Adjustment according to instructions in <u>Submit an Adjustment to</u> <u>Correct Claims Partially Denied by Automated LCD-NCD Denials</u>
    - Only for line-item denial reason codes 55A00, 55A01, 52NCD, 53NCD, 54NCD and 59XXX series
  - Written request according to instructions in <u>Reopenings for Minor</u> <u>Errors and Omissions</u>
    - If electronic adjustment cannot be made (i.e., when claim denied in full) an electronic or written reopening request may be submitted to facilitate clerical error/omission reopening request process





## What if There Is No NCD or LCD?

- Check for coverage guidelines in CMS IOMs, CRs, and MLN Matters articles
- Check <u>NGS website</u>
- Check for related medical policy article
- Make sure service not statutorily or administratively excluded
  - <u>CMS IOM Publication 100-02, Medicare Benefit Policy Manual,</u> <u>Chapter 16, General Exclusions From Coverage</u>
- If no written guidelines on coverage exist, you can request creation of new LCD
  - A56198: <u>New Local Coverage Determination (LCD) Request Process</u>





# **Accessing Coverage Information**

### Accessing Medical Policies/LCDs

<u>NGS website</u>

	Revices HOME EDUCATIO	Contact Us NGSConnex Subscribe for Email Up N - RESOURCES - EVENTS ENROLLMENT	APPS -
FEEDBACK	Medical Policies/LCDs Find LCDs and related billing and coding articles	Enrollment Getting started, after you enroll, and revalidating your enrollment	Fee Schedules & Pricers Code pricing search, payment systems, limits, and fee schedule lookup
Ë	Claims and Appeals Learn about claims, top errors, fees, MBI and appeals	Overpayments           \$         Repayment schedules, and post-pay adjustment	Medicare Compliance Medical Review, Prior Authorization, Fraud & Abuse, CERT, and more





### Searching LCDs on NGS Website

#### MEDICAL POLICIES/LCDS

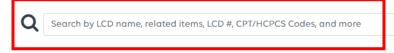
#### National Government Services Local Coverage Determinations

Welcome to Medical Policies. Below you will find the <u>LCDs</u>, related billing & coding articles and additional medical policy topics. When entering criteria into the search box, the search results will be conducted within the LCDs and the Medical Policy Articles shown below.

Please note: There are many procedures for which NGS does not have an LCD/Billing and Coding Article. If your search does not return any coverage documents, then NGS does not have a local coverage statement for that procedure.

For additional Medical Policy Topics, refer to the bottom of the page.

[View Draft Policies | View Future Effective LCDs | View Future Effective Billing & Coding Articles | National Coverage Determinations]



Local Coverage Determinations Medical Policy Articles

#### Local Coverage Determinations

LCD	LCD #	Billing and Coding #	Response to Comments	Related <u>CPT/HCPCS</u> Codes
Allogeneic Hematopoietic Cell Transplantation for Primary Refractory or Relapsed Hodgkin and Non-Hodgkin Lymphoma with B-cell or T-cell Origin <i>Related terms:</i>	L39513	A59311	A59451	38240





## NGS Medical Policy

- LCDs
- Billing and coding articles
- Medical policy articles







### CMS Website

- Medicare Coverage Determination Process
  - Information on LCDs
  - How to request NCD
  - Medicare coverage guidance documents
  - Medicare Coverage General Information
    - ICD-10 link: Transmittal (change request) updates related to NCDs
    - Lab NCDs ICD-10: Files containing lab NCD coding updates
- <u>Medicare Coverage Center</u>
  - CMS "home" for coverage information with links to valuable resources





### Medicare Coverage Database

- Searchable <u>Medicare Coverage Database</u> contains
  - All NCDs and LCDs
  - Proposed NCD decisions
  - LCD billing and coding articles
  - Draft LCDs and articles
  - Coding Analyses for Labs (CALs)
  - Medicare Evidence Development & Coverage Advisory Committee (MEDCAC) proceedings
  - Technical Assessments (TAs)
  - Medicare coverage guidance documents



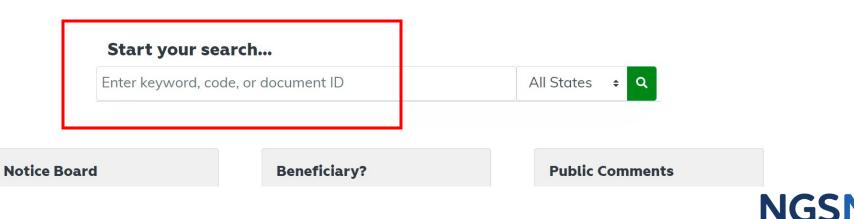


### How to Use the Medicare Coverage Database

• MLN® Educational Tool: <u>How to Use the Medicare Coverage</u> <u>Database</u>

MCD Medicare Coverage Database	<u>Search</u> Reports Downloads	∰ ? ¢ Archive <sup>™</sup> API <sup>™</sup>
<b>←CMS</b> .gov	Centers for Medicare & Medicaid Services	About Us Newsroom Data & Research
An official website of the United States	government <u>Here's how you know</u> ✓	

#### Welcome to the MCD Search





## Viewing LCDs on the MCD

SERVICE

Back to MCD Search		
ontents Contractor Information	Local Coverage Determination (LCD) Outpatient Physical and Occupational Therapy Services	
LCD Information General Information	L33631 Expand All   Collapse A	
Revision History Information Associated Documents	Contractor Information	`
Keywords	LCD Information	•
	General Information	``
	Revision History Information	· · · · · · · · · · · · · · · · · · ·

NGSM 30

### Avoiding Administrative Burden

- YouTube Video: 2021 Holistic Approach to Reducing Inquiries
  - Seven steps to take before submitting your claim or inquiry







# **Resources and References**

### **CMS** Resources

- Federal Register/Vol. 78, No. 152/Wednesday, August 7, 2013/Notices
  - <u>Medicare Program; Revised Process for Making National Coverage</u> <u>Determinations</u>
- MLN® Educational Tool: <u>How to Use the Medicare Coverage</u> <u>Database</u>
- Medicare Coverage Determination Process
- <u>Medicare Coverage Document Type Descriptions</u>
- <u>Medicare Coverage Database</u>





### **CMS IOM Resources**

- CMS IOM Publications
  - <u>100-02, Medicare Benefit Policy Manual</u>
  - <u>100-03, Medicare National Coverage Determinations (NCD) Manual</u>
  - <u>100-04, Medicare Claims Processing Manual</u>
  - <u>100-08, Medicare Program Integrity Manual, Chapter 13 Local</u> <u>Coverage Determinations</u>





## Medical Policy Resources

- <u>Medical Policies/LCDs</u>
- <u>Contractor Advisory Committee (CAC)</u>
- <u>LCD Open Meetings</u>
- Investigational Device Exemption Requests
- Medical Policy Contact Information
- A56198: <u>New Local Coverage Determination (LCD) Request</u>
   <u>Process</u>
- Medical Policy Article A52842: <u>Local Coverage Determination</u> (LCD) Reconsideration Process



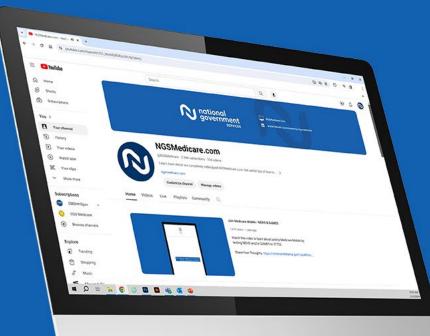


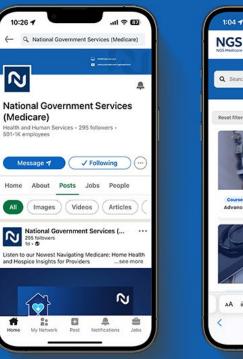
### NGS Resources

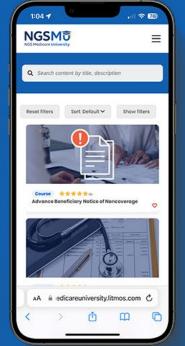
- Submit an Adjustment to Correct Claims Partially Denied by Automated LCD-NCD Denials
- About Appeals
- <u>Top Claim Errors</u>
- Acronym Search











### **Connect with** us on social media



YouTube Channel Educational Videos

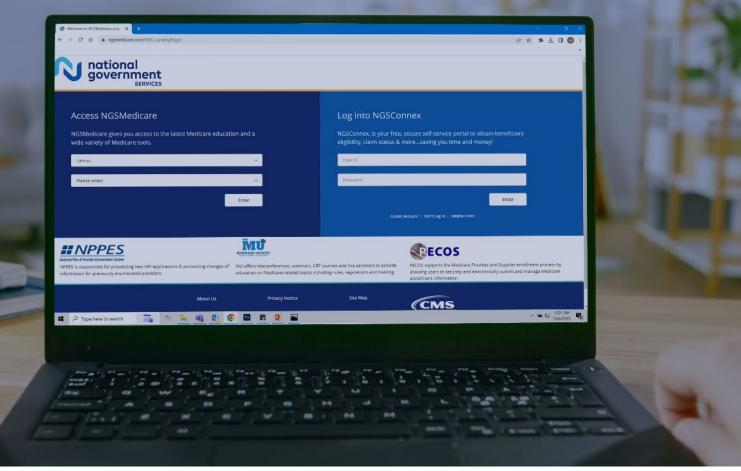








### Find us online





#### www.NGSMedicare.com Online resources, event calendar,

LCD/NCD, and tools



nationa

aovernment

SERVICES

#### IVR System

The interactive voice response system (IVR) is available 24-hours a day, seven days a week to answer general inquiries



#### NGSConnex Web portal for claim information



#### Sign up for Email Updates

Subscribe for Email updates at the top of any NGSMedicare.com webpage to stay informed of news





# Questions?

Thank you!