

The Centers for Medicare and Medicaid Services (CMS) sometimes announces new information about coverage under the Medicare program. When this happens, CMS issues a National Coverage Determination (NCD). CMS requires health plans to notify their Medicare Advantage members about NCDs.

What is an NCD?

NCDs tell us about new services or items that are covered or a change in coverage under Medicare.

How do I find out about new NCDs?

Throughout the year, Bright HealthCare™ will post information on new or changed NCDs on this website (see list below). You also can view all NCDs on the <u>CMS website</u>.

What if I have questions about my Medicare coverage?

Please call the Member Services number on the back of your member ID card.

Below are NCD updates released since September 2021.

NCD Name	Cochlear Implantation
NCD Effective Date	Sept. 26, 2022
NCD Summary	The Centers for Medicare & Medicaid Services (CMS) is expanding coverage by broadening the patient criteria and removing the requirement that for individuals with hearing test scores of >40% and ≤60%, cochlear implantation may be covered only when the provider is participating in and patients are enrolled in either an FDA-approved category B IDE clinical trial, a trial under the CMS Clinical Trial Policy, or a prospective, controlled comparative trial approved by CMS. CMS concluded that the evidence is sufficient to determine that cochlear implantation may be covered for treatment of bilateral pre- or post-linguistic, sensorineural, moderate-to-profound hearing loss in individuals who demonstrate limited benefit from amplification. Limited benefit from amplification is defined by test scores of less than or equal to 60% correct in the best-aided listening condition on recorded tests of open-set sentence cognition. Patients must meet all of the following criteria:
	Diagnosis of bilateral moderate-to-profound sensorineural hearing impairment with limited benefit from appropriate hearing (or vibrotactile) aids;
	 Cognitive ability to use auditory clues and a willingness to undergo an extended program of rehabilitation;
	 Freedom from middle ear infection, an accessible cochlear lumen that is structurally suited to implantation, and freedom from lesions in the auditory nerve and acoustic areas of the central nervous system;
	No contraindications to surgery; and
	The device must be used in accordance with Food and Drug Administration (FDA)-approved labeling.
	CMS may also provide coverage of cochlear implants for beneficiaries not meeting the coverage criteria listed above when performed in the context of FDA-approved category B investigational device exemption clinical trials as defined at 42 CFR 405.201 or as a routine cost in clinical trials under section 310.1 of the National Coverage Determinations Manual titled Routine Costs in Clinical Trials.
For More Information	See the <u>CMS website</u>

NCD Name	Home Use of Oxygen
NCD Effective Date	July 8, 2022
NCD Summary	On September 27, 2021, CMS issued a national coverage determination (NCD) for Home Use of Oxygen (NCD 240.2). CMS is amending the NCD in order to conform section D with the specific time period specified in the Social Security Act. Section D pertains to the Medicare Administrative Contractor (MAC) authority to determine reasonable and necessary coverage. Specifically, CMS amended the period of initial coverage for these patients from 120 days to 90 days, in order to align with the 90-day statutory time period.
For More Information	See the CMS website

NCD Name	Monoclonal Antibodies Directed Against Amyloid for the Treatment of Alzheimer's Disease
NCD Effective Date	April 7, 2022
NCD Summary	CMS covers Food and Drug Administration (FDA) approved monoclonal antibodies directed against amyloid for the treatment of Alzheimer's disease when furnished in accordance with Coverage Criteria under Coverage with Evidence Development (CED) for patients who have:
	A clinical diagnosis of mild cognitive impairment (MCI) due to Alzheimer's disease or mild Alzheimer's disease dementia, both with confirmed presence of amyloid beta pathology consistent with Alzheimer's disease.
For More Information	See the <u>CMS website</u>

NCD Name	Screening for Lung Cancer with Low Dose Computed Tomography (LDCT)
NCD Effective Date	Feb. 10, 2022
NCD Summary	CMS has determined that the evidence is sufficient to expand the eligibility criteria for Medicare beneficiaries receiving low dose computed tomography (LDCT) when all of the following criteria are met:
	Beneficiary eligibility criteria:
	Patient age of 50 – 77 years.
	Asymptomatic (no signs or symptoms of lung cancer).
	History of tobacco smoking of at least 20 pack-years.
	*Note: One pack-year = smoking one pack per day for one year; one pack = 20 cigarettes.
	Current smoker or one who has quit smoking within the last 15 years.
	Lung cancer screening with LDCT is ordered by a provider.
For More Information	See the <u>CMS website</u>

NCD Name	Transvenous (Catheter) Pulmonary Embolectomy
NCD Effective Date	Oct. 28, 2021
NCD Summary	CMS is removing the NCD for Transvenous (Catheter) Pulmonary Embolectomy (NCD § 240.6). Under NCD 240.6, this procedure was not covered under Medicare. Removal of the NCD means Medicare coverage determinations for Transvenous (Catheter) Pulmonary Embolectomy can be made by Medicare Administrative Contractors (MACs) and Medicare Advantage Organizations under § 1862(a)(1)(A) of the Social Security Act (the Act) (based on medical necessity).
For More Information	See the <u>CMS website</u>

NCD Name	Home Oxygen Use to Treat Cluster Headache
NCD Effective Date	Sept. 27, 2021
NCD Summary	CMS is removing NCD 240.2.2 in the Medicare NCD Manual, ending coverage with evidence development (CED), and allowing the Medicare Administrative Contractors (MACs) to make coverage determinations regarding the use of home oxygen and oxygen equipment for cluster headache.
For More Information	See the <u>CMS website</u>

NCD Name	Home Use of Oxygen
NCD Effective Date	Sept. 27, 2021
NCD Summary	CMS is modifying NCD 240.2, Home Use of Oxygen, in the Medicare NCD Manual to expand patient access to oxygen and oxygen equipment in the home, and to permit contractors to cover the use of home oxygen and oxygen equipment in order to treat cluster headache and other acute conditions.
For More Information	See the <u>CMS website</u>

Note: The scope of this decision does not include any consideration of Home Use of Oxygen in Approved Clinical Trials, identified in section 240.2.1 of the NCD Manual. Additionally, the scope of the decision does not include any consideration of hyperbaric oxygen for any indication, currently identified in section 20.29 of the NCD Manual.

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