

## **Clarifications about National Coverage Determinations (NCDs) and Local Coverage Determinations (LCDs)**

This is a reminder that all Medicare local and national coverage policies are translated for ICD-10, and providers must bill using ICD-10 codes for services rendered on or after October 1, 2015 in order to receive payment. The NCD and LCD policies list which ICD-10 codes support medical necessity. You can find the NCD and LCD policies by visiting:

<https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx>

### **NCDs**

CMS has recently received stakeholder feedback regarding selected NCDs, specifically questions regarding the applicability of certain ICD 10 codes to transitioned policies. Therefore, CMS has provided additional clarification and coding refinements to those NCDs as part of our normal business process. We have issued updates to our claims processing instructions and published new translation spreadsheets through change request 9252.

CMS is committed to resolving these small isolated issues quickly to ensure that claims continue to process. Interim solutions are currently in place to permit appropriate and timely claims payment. In most cases, claims inappropriately rejected or denied have been automatically reprocessed and no action is required by the provider. A permanent systems update will be in place by January 4, 2016. Information about specific claim types and the reprocessing of claims is available on your Medicare Administrative Contractors (MAC) website.

### **LCDs**

All of the MACs updated their LCDs prior to the ICD-10 implementation date of October 1, 2015. Once ICD-10 was implemented, some MACs identified LCDs for which they needed to further refine their edits to add allowable ICD-10 diagnosis codes. In general, claims affected by these edits with dates of service on and after October 1, 2015 were suspended until the fixes were implemented. Once the LCD updates were implemented, the MACs released and processed the held claims. Any claims inappropriately denied before the LCD updates were automatically reprocessed. Should any additional LCD issues be identified they would follow this same process. Questions about specific LCDs should be directed to the appropriate MAC.

Our contractors understand the challenges that updating CMS systems may bring to our providers and strive to provide quick resolution when issues are noted. For the handful of issues that were noted after October 1, 2015, CMS contractors have moved quickly to take action, such as temporarily suspending edits and/or claims, making fixes as quickly as possible, and reprocessing claims to minimize impact on providers.