# **CMS Manual System** Pub 100-03 Medicare National Coverage Determinations

**Transmittal 46** 

Department of Health & Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

Date: JANUARY 27, 2006 Change Request 4280

#### SUBJECT: Cardiac Catheterization Performed in Other Than a Hospital Setting

**I. SUMMARY OF CHANGES:** Effective for services performed on or after January 12, 2006, CMS is repealing section 20.25 of the National Coverage Determinations (NCD) Manual (100.3). In the absence of an NCD on cardiac catheterization in other than a hospital setting, coverage is determined by the local Medicare contractor.

NEW/REVISED MATERIAL EFFECTIVE DATE: January 12, 2006 IMPLEMENTATION DATE: February 27, 2006

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

#### II. CHANGES IN MANUAL INSTRUCTIONS: R = REVISED, N = NEW, D = DELETED

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
R	1/20.25/Cardiac Catheterization Performed in Other Than a Hospital Setting

#### **III. FUNDING:**

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.

**IV. ATTACHMENTS:** Business Requirements Manual Instruction *\*Unless otherwise specified, the effective date is the date of service.* 

## **Attachment - Business Requirements**

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#### SUBJECT: Cardiac Catheterization Performed In Other Than A Hospital Setting

#### I. GENERAL INFORMATION

The CMS is repealing Section 20.25, titled Cardiac Catheterization Performed In Other Than A Hospital Setting, of Pub. 100.3, National Coverage Determination Manual. Repeal of this section will result in determinations of coverage for cardiac catheterization when performed outside the hospital setting at the discretion of the local Medicare contractor.

**A. Background:** The original language from section 20.25 required that Medicare carriers in consultation with the peer review organizations (PROs), renamed quality improvement organizations (QIOs), review freestanding cardiac catheterizations facilities to determine that procedures can be performed safely. This function of the QIO is no longer in their scope of work as their focus has shifted to include other functions. Therefore, QIOs are not working with carriers to make such safety determinations.

**B. Policy:** The CMS is repealing the NCD at 20.25 of Pub. 100.3 as the original language does not provide relevant guidance to contractors in making decisions regarding the coverage of cardiac catheterization in freestanding facilities. Repealing the policy will result in local contractor discretion. Contractors may find it appropriate to develop local coverage determinations (LCDs) through the LCD process regarding coverage of cardiac catheterization services in freestanding facilities.

### **II. BUSINESS REQUIREMENTS**

"Shall" denotes a mandatory requirement "Should" denotes an optional requirement

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)							
		F I	R H H I	C a r r i e r	D M E R C	Shar Mai F I S S		C	Other
4280.1	Effective for services performed on or after January 12, 2006, carriers will no longer be bound by section 20.25 of Pub. 100.3, the NCD Manual. Coverage for those services shall be at the discretion of the local carrier.			Х					

## **III. PROVIDER EDUCATION**

-	Requirements							indi	cate	es the
Number		F I	R H	C a	D M		oly) red S intaii		m	Other
			H I	r r i e r	E R C	F I S S	M C S	V M S	C W F	
4280.2	A provider education article related to this instruction will be available at <u>www.cms.hhs.gov/medlearn/matters</u> shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin and incorporated into any educational events on this topic. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.			X						

#### IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

#### A. Other Instructions: N/A

X-Ref Requirement #	Instructions

#### B. Design Considerations: N/A

X-Ref Requirement #	<b>Recommendation for Medicare System Requirements</b>

#### C. Interfaces: N/A

#### D. Contractor Financial Reporting /Workload Impact: N/A

## E. Dependencies: N/A

F. Testing Considerations: N/A

## V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: January 12, 2006 Implementation Date: February 27, 2006	No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating					
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<b>Post-Implementation Contact(s):</b> JoAnna Baldwin, joanna.baldwin@cms.hhs.gov						

\*Unless otherwise specified, the effective date is the date of service.

20.25 - Cardiac Catheterization Performed in Other Than a Hospital Setting (*Effective January 12, 2006 – Repealed*)

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