

CMS NCD Updates



Medicare coverage is limited to items and services that are reasonable and necessary for the diagnosis or treatment of an illness or injury (and within the scope of a Medicare benefit category). National coverage determinations (NCDs) are made through an evidence-based process, with opportunities for public participation. In some cases, CMS' own research is supplemented by an outside technology assessment and/or consultation with the [Medicare Evidence Development & Coverage Advisory Committee \(MEDCAC\)](#). In the absence of a national coverage policy, an item or service may be covered at the discretion of the Medicare contractors based on a local coverage determination (LCD).

NCD	Name	Description of update
240.2	Home use of oxygen	Updates covered and non-covered indications for home oxygen uses https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=169&ncdver=2&bc=0
240.2.2	Enteral and Parenteral Nutritional Therapy	This NCD is removed, implementation date 7/5/2022 https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=343&ncdver=2&bc=0
180.2	Home Oxygen to treat cluster headache	This NCD is removed, implementation date 1/3/2023 https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=343&ncdver=2&bc=0
220.6	Positron emission tomography	This NCD is removed, implementation date 7/5/2022 https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=211&ncdver=6&bc=0
210.14	Lung cancer screening with low exam dose computed tomography	Expands the eligibility criteria for this exam https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=343&ncdver=2&bc=0