

Part B Insider (Multispecialty) Coding Alert

COVERAGE: CMS Plans to Reach Out for Tech Advice

If you think you're having a hard time keeping up with the galloping advances in medical technology, just think how the **Centers for Medicare & Medicaid Services** must feel.

CMS put out a draft document explaining guidelines it may use for seeking an external Technology Assessment when it's considering a new device for a national coverage decision. The Medicare Coverage Advisory Committee may request an external TA when:

1. the scope and scale of the TA involved are too massive to review internally in a reasonable timeframe; or
2. the complexity of one or more TA activities needs extra help for Coverage Advisory Group staff. This help may be in specific clinical or sub-clinical areas or methodology, such as creating analytical frameworks, applying systematic review methods, or using methods such as meta-analyses or Markov modeling.

CMS may send TA activities to the Medicare Coverage Advisory Committee when the questions are too numerous or complex, there are potentially relevant factors not directly related to evidence review, there are competing or conflicting TAs from external sources, or formal public input on TA methods will be especially important.

CMS says it will refer issues that aren't related to a specific coverage determination to the MCAC if discussion or a general methodological approach will be beneficial, or if a group of related coverage issues arises over time and a common approach may be helpful.

Separately, CMS says it's considering coverage determinations for stem cell transplantation and oxaliplatin (eloxatin) for colorectal cancer.