

What You Need to Know About LCDs

What is an LCD?

An LCD is a Local Coverage Determination, or policy, developed by your Medicare Administrative Contractor (MAC). Like your dental policy which might say it will pay for braces up to age 18 or will pay for cleanings twice a year, LCDs give guidance as to the MAC's specific coverage, coding and documentation requirements.

How many LCDs are there?

Some MACs have hundreds, others maybe a few dozen. They cover many different medical services.

Do all MACs have therapy LCDs?

No. While most MACs have LCDs that apply to therapy services, not all MACs have them. Some key words in LCD titles to look for are: Dysphagia, Outpatient Therapy, Physical Medicine and Rehabilitation, Swallowing, Physical Therapy, Occupational Therapy, Speech-language Pathology, Debridement, Respiratory Therapy, Biofeedback, Strapping, Wound Care.

What might I find in the therapy LCD about therapy coverage?

The LCDs will describe the type of patient conditions and services that they consider to meet the Medicare medical necessity guidelines for covered therapy services. The LCD may define specific services that the MAC does not cover. The LCD might also indicate utilization guidelines such as how many units of therapy a day it might cover for certain CPT codes.

What types of coding guidelines are often in LCDs?

Some LCDs will specify that they don't pay for certain CPT Codes. Some LCDs will list "covered" ICD-9 codes. When the LCD lists the covered ICD-9 codes then at least one of the ICD-9 codes that we add to our POC must be from the covered list. In addition, almost all therapy-related LCDs will define the CPT Codes, describing the types of services to bill under each code.

What type of documentation guidance can be found in LCDs?

Not all LCDs will give documentation guidance. Many will describe the types of impairment assessments or treatment intervention descriptions that would be expected to be documented to support certain diagnoses or CPT Codes.

The LCD for my MAC provides documentation guidelines that seem to require more documentation than what I thought Medicare required. Do I have to follow the MAC guidelines?

Look at the specific words used in the LCD. "Shall", "required", and "must" means that what they are describing is mandatory. "Should" means that it's recommended.

Do the medical reviewers follow the LCDs when doing their reviews?

Yes. They are required to follow the guidelines in the LCD when conducting their reviews.

How often do LCDs change?

A MAC can change an LCD at any time. They may change several times a year or may maintain the same version for multiple years. It's important to always be working off of the current LCD.

How do I know if there is a newer version of the LCD that I have printed out in our therapy office?

Each LCD will list an Effective Date and/or Revision Date on the first page. If the Medicare Coverage Database version you check has a newer Effective Date/Revision Date it's time to replace the printed copy in your office.

I see that there's a newer version of my SLP LCD. How can I tell what has changed without having to do a side by side comparison? Scroll to the end of the LCD and review the most recent Revision History. It will tell you what has changed.

Where do I find the LCDs?

The Medicare Coverage Database contains the official, most current LCDs for each MAC.

<http://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx?clickon=search>

You can also search the MAC's website for the LCDs.

I have never searched for an LCD before. I am not even sure my MAC has therapy LCDs, let alone which type of LCDs they might have that apply to therapy. Where do I start?

The resource, *Accessing LCDs on the Medicare Coverage Database*, is a step by step guide to finding LCDs. There are 4 different search options on the Medicare Coverage Database and each is described in the resource. You will want to start with the Indexes Search.

When I search for my MAC's Physical Therapy LCD, multiple LCDs come up. How do I know which one to pick?

"Always choose Part A!" Part A in this context refers to facility-based providers such as SNFs, HH, hospitals, rehab agencies. The therapists in private practice choose the Part B LCDs.

You may notice that there are multiple "Part A" physical therapy LCDs for your MAC. This is because MACs develop a separate LCD for each state in the MAC's jurisdiction. There is a Contract Number assigned to each state. For example, 06101 is the National Government Services Contract Number of Illinois. All LCDs for that state will have the same Contract Number. When you open an LCD the state will be listed on the first page next to Jurisdiction.

For example, to ensure that you have the correct PT LCD, you need the Part A LCD from your MAC for your state.

Once you find the desired LCD, make note of the **LCD ID Number** and the **State Contractor Number** to allow for a quick search next time.

The screenshot displays the Medicare Coverage Database interface. It is divided into two main sections: Contractor Information and LCD Information. Red boxes highlight specific fields in both sections.

Contractor Information		
Contractor Name National Government Services, Inc.	Contract Number 08101	Contract Type MAC - Part A
MAC Name	State Contractor Number	Always choose Part A

LCD Information		
Document Information		
LCD ID L28884	LCD ID Number	Jurisdiction Illinois
LCD Title Outpatient Physical and Occupational Therapy Services	Original Effective Date For services performed on or after 07/01/2008	State covered
AMA CPT/ADA CDT Copyright Statement CPT only copyright 2002-2013 American Medical Association. All Rights Reserved. CPT is a registered trademark of the American Medical Association.	Revision Effective Date For services performed on or after 11/01/2013	Effective Date