CMS Manual System	Department of Health & Human Services (DHHS)				
Pub 100-03 Medicare National Coverage Determinations	Centers for Medicare & Medicaid Services (CMS)				
Transmittal 11159	Date: December 16, 2021				
	Change Request 12537				

SUBJECT: Transvenous (Catheter) Pulmonary Embolectomy National Coverage Determination (NCD) § 240.6

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to inform contractors that the Centers for Medicare & Medicaid Services (CMS) has removed the Transvenous (Catheter) Pulmonary Embolectomy (TPE) NCD (Section 240.6) from the Medicare Publication (Pub.) 100-03, NCD Manual, as a result of the NCD Reconsideration process. This CR does not establish a national coverage policy for TPE. In the absence of an NCD, coverage determinations for TPEs are made by the Medicare Administrative Contractors (MACs). Refer to the Background and Policy sections of this document for the additional information.

EFFECTIVE DATE: October 28, 2021

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

IMPLEMENTATION DATE: January 17, 2022

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: (N/A if manual is not updated) R=REVISED, N=NEW, D=DELETED-*Only One Per Row*.

R/N/D CHAPTER / SECTION / SUBSECTION / TITLE			
R	1/ 240/ 6/ Transvenous (Catheter) Pulmonary Embolectomy		

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Business Requirements Manual Instruction

Attachment - Business Requirements

Pub. 100-03	Transmittal:11159	Date: December 16, 2021	Change Request: 12537
1 ub. 100-05	11 ansimital. 11137	Date. December 10, 2021	Change Request. 12357

SUBJECT: Transvenous (Catheter) Pulmonary Embolectomy National Coverage Determination (NCD) § 240.6

EFFECTIVE DATE: October 28, 2021

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

IMPLEMENTATION DATE: January 17, 2022

I. GENERAL INFORMATION

A. Background:

Prior to this CR, Medicare did not cover Transvenous (Catheter) Pulmonary Embolectomy (TPE), per NCD Section 240.6. TPE is a treatment for patients with acute pulmonary embolism. Pulmonary Embolism (PE) occurs when a thrombus (clot) that forms in the body, such as in the deep veins of the legs (Deep Venous Thrombosis (DVT)) breaks loose, travels through the venous system, and gets lodged in one or more pulmonary arteries feeding the lungs. Both DVT and PE are a continuum of a single disease process: venous thromboembolism. TPE, also called percutaneous pulmonary thrombectomy, mechanical thrombectomy, and catheter embolectomy, involves catheter-directed extraction of the clot.

The CMS internally generated this NCD reconsideration based upon stakeholder feedback, including in public comments from the 2021 Physician Fee Schedule proposed rule, which included a number of proposed NCD removals.

As a result of the removal of the non-coverage NCD for TPE, CMS is removing the current text of Section 240.6 of the NCD Manual (Pub 100-03), Chapter 1, Part 4.

B. Policy: Effective for claims with dates of service on or after October 28, 2021, CMS removes the NCD for TPE. This CR does not establish a national coverage policy for TPE. In the absence of an NCD, coverage determinations will be made by the Medicare Administrative Contractors (MACs) under section 1862(a)(1)(A) of the Social Security Act.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Re	Responsibility							
		A/B MAC		DME	Shared-System Maintainers				Other	
		A	В	ННН	MAC	FISS	MCS	VMS	CWF	
12537.1	Effective for claims with dates of service on or after October 28, 2021, Medicare will no longer have a national policy of non-coverage for Transvenous (Catheter) Pulmonary Embolectomy. In the absence of an NCD, coverage determinations are made by the Medicare Administrative	X	X							

Number	Requirement	Re	Responsibility							
		A/B MAC		A/B MAC DM		Shared-System Maintainers			Other	
		Α	В	ННН		FISS	MCS	VMS	CWF	
					MAC					
	Contractors. Section 240.6 (<i>Transvenous (Catheter)</i> Pulmonary Embolectomy) of the Medicare National Coverage Determinations Manual (Pub 100-03), Chapter 1, Part 4, has been revised accordingly.									

III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spoi	nsibility	,	
			A/ M/		DME MAC	CEDI
		A	В	ННН		
12537.2	Medicare Learning Network® (MLN): CMS will market provider education content through the MLN Connects® newsletter shortly after CMS releases the CR. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 instructions for distributing the MLN Connects newsletter information to providers and link to relevant information on your website. You may supplement MLN content with your local information after we release the MLN Connects newsletter. Subscribe to the "MLN Connects" listserv to get MLN content notifications. You don't need to separately track and report MLN content releases when you distribute MLN Connects newsletter content per the manual section referenced above.	X	X			

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

[&]quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): David Dolan, 410-786-3365 or David.Dolan@cms.hhs.gov (Coverage and Analysis Group (CAG)), Wanda Belle, 410-786-7491 or wanda.belle@cms.hhs.gov (Coverage and Analysis Group (CAG)), Daniel Feller, 410-786-6913 or daniel.feller@cms.hhs.gov (Coverage and Analysis Group (CAG))

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0

240.6 - Transvenous (Catheter) Pulmonary Embolectomy (TPE)

(Rev. 11159, Issued: 12-16-21, Effective: 10-28-21, Implementation: 01-17-22)

Effective 10/28/2021, the Centers for Medicare & Medicaid Services removed the national coverage determination (NCD) for Transvenous (Catheter) Pulmonary Embolectomy (TPE). In the absence of an NCD, coverage determinations will be made by the Medicare Administrative Contractors under section 1862(a)(1)(A) of the Social Security Act.