

## Carrier Advisory Committees

MACs, or [Medicare Administrative Contractors](#), are required to establish a Carrier Advisory Committee (CAC) for each state. For states that currently have multiple MACs, a joint CAC will be established.

CACs have the opportunity to:

- Discuss draft Local Coverage Determinations (LCDs)
  - Provide input and comment on draft policies
  - Improve the relationship between Medicare and the provider community
- The CACs should meet at least three times a year.

CAC members are expected to distribute the draft LCDs to their state providers and specialty societies. They are expected to report back to the committee on any comments received. The members should also provide their state providers and specialty societies with a summary of what occurred at the CAC meetings. More information about the CAC members' roles and meeting structure can be found in the CH 13.8.1 of the [Medicare Program Integrity Manual](#).

## Local Coverage Determinations (LCDs)

Each MAC is responsible for developing coverage policies within their jurisdiction. These policies are called Local Coverage Determinations (LCDs).

An LCD is a tool that assists providers in submitting correct claims for items and services by describing the clinical circumstances under which a service is covered by Medicare (i.e., considered "reasonable and necessary"). MACs are required to develop uniform LCDs for all the states in their assigned A/B MAC jurisdiction. Newly-awarded MACs can consolidate all of the local coverage policies for each state into new local coverage policies for the MAC based on the "least restrictive" coverage policies.

The process by which MACs develop LCDs is outlined in the Centers for Medicare & Medicaid Services' (CMS) [Medicare Program Integrity Manual](#) in Chapter 13.

A MAC **must** develop a new/revised LCD when:

- It has identified an item or service that is never covered under certain circumstances, and
- It wishes to establish an automated review in the absence of a CMS-mandated Medicare National Coverage Decision (NCD) or other coverage provision that supports automated review. A MAC **may choose** to develop an LCD if it has identified a validated widespread problem that it sees as posing a significant risk to Medicare trust funds.

Alternatively, an LCD **may** be developed if:

- It is deemed necessary by the MAC to ensure beneficiary access to care

- One MAC has assumed another's workload, or is trying to develop uniform LCDs across multiple states
- Frequent denials of a service are issued or anticipated  
 CMS requires that MACs provide the physician community and the public an opportunity to contribute to the LCD process. Open meetings are held by MACs to discuss draft LCDs. Interested parties may attend and comment. Draft LCDs are released for a public comment period (with some exceptions) before being implemented. Final LCDs may be appealed by beneficiaries, providers or other interested parties requesting a revision to part or all of an LCD.

## **National Coverage Determinations (NCDs)**

NCDs are policies developed by [CMS](#) that outline the coverage of an item or service. NCDs are national and supersede LCDs. If an LCD is affected by an NCD it must be changed by the contractor. Contractors must inform the provider community of any new NCDs and post the information on their website.

*How to Find an LCD or NCD*

All LCDs and NCDs are found on the [Medicare Coverage Database \(MCD\) website](#).

*Options for Searching for a Coverage Determination*

1. [Quick Search](#): Located on the right side of the MCD Overview Page.
2. [Advanced Search](#): Allows you to find a document by the exact ID number, if you have it, or by document type.
3. [Indexes](#): Allows you a complete list of policies by state or contractor or by alphabetical order. This site also provides additional articles from contractors about policies and contact information.

## **Carrier Advisory Committee (CAC) Network Meeting**

Each year, ASCO and the American Society of Hematology (ASH) host a Carrier Advisory Committee (CAC) Network Meeting. ASCO and ASH invite CAC representatives and CAC alternates from oncology and hematology, Medicare Contractor Medical Directors, and state oncology/hematology society representatives to attend the meeting.

The meeting enables CAC representatives from across the country to:

- Meet and discuss issues related to their CAC role
- Share challenges
- Discuss Medicare coverage issues
- Brainstorm potential solutions

The purpose of the meeting is to strengthen communication and collaboration among CAC representatives.

ASCO and ASH are the hosts and sole sponsors of the CAC Network Meeting. The meeting does not have industry sponsorship nor industry participation. (ASCO and ASH divested this meeting of industry sponsorship and participation in 2008.)

More information for the 2019 ASH/ASCO CAC Network Meeting will be forthcoming.

*Previous CAC Network Meetings*

- [2018 CAC Network Meeting Materials](#)
- [2017 CAC Network Meeting Materials](#)
- [2016 CAC Network Meeting Materials](#)

For more information on previous meetings or the upcoming CAC Network Meeting, please [email our team](#).