

Medicare National Coverage Determination (NCD)

Topic: Stem Cell Transplantation

Decision: The Centers for Medicare & Medicaid Services (CMS) is clarifying that bone marrow and peripheral blood stem cell transplantation is a process which includes mobilization, harvesting, and transplant of bone marrow or peripheral blood stem cells and the administration of high dose chemotherapy or radiotherapy prior to the actual transplant. When bone marrow or peripheral blood stem cell transplantation is covered, all necessary steps are included in coverage. When bone marrow or peripheral blood stem cell transplantation is non-covered, none of the steps are covered.

What this means: Effective for claims with dates of service on and after January 26, 2016, and later.

For more information, contact Customer Service at the number listed on your ID card.

This announcement can be found at:

Coverage Transmittal Link

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R193NCD.pdf>

Effective date: January 27, 2016