## Expert Consultant Consent to Public Disclosure of Opinion and Participation in the Open Draft/Revised LCD Discussion Meeting

	AFT UMBER/TITLE:
MEETING DATE:	
Me gui- field app the suc Adr Pro	or to drafting and during the development of a Local Coverage Determination (LCD), dicare Administrative Contractors (MACs) may supplement their research with clinical delines, consensus documents or consultation by experts (recognized authorities in the d), medical associations or other health care professionals for an advisory opinion, when olicable. When a MAC consults with an expert, it must inform and obtain consent from expert that their opinion may be used, disclosed publicly, and be clearly identified as the within the proposed or final LCD. The purpose of this document is to document CGS ministrators, LLC compliance with this requirement pursuant to IOM 100-08 Medicare orgam Integrity Manual Ch. 13 - Local Coverage Determinations, 13.2.3 - Clinical Guidelines, insensus Documents and Consultation.
1.	Do you or any member of your immediate family own stock or have another formal financial interest in any item or service affected by the LCD topic on which you are opining, or in any company that develops, manufactures, finances, distributes and/or markets any such item or service?  Yes If yes, please explain:
2.	I (Print Name), hereby consent to the public disclosure of my opinion and agree that it may be used and will be clearly identified as my opinion within the following proposed or final LCD on facet joint and medial nerve branch procedures as developed by CMS A/B MAC Medical Directors:
3.	My Occupation and Employer:
l ce	ertify that the above statements are accurate and true.
SIG	NATURE DATE
Ple	ase return this signed and dated consent to: <a href="mailto:CMD.Inquiry@cgsadmin.com">CMD.Inquiry@cgsadmin.com</a> .
	e signature must be handwritten or an electronic signature. Imped signatures are not acceptable.
	cerely,



