



Related MLN Matters Article #: MM5926

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### *Healthcare Common Procedure Coding System (HCPCS) Codes Subject to and Excluded from Clinical Laboratory Improvement Amendments (CLIA) Edits*

#### Key Words

MM5926, CR5926, R1471CP, HCPCS, CLIA, Laboratory

#### Provider Types Affected

Clinical diagnostic laboratories billing Medicare Carriers or Part A/B Medicare Administrative Contractors (A/B MACs) for laboratory tests

#### Key Points

- The effective date of the instruction is January 1, 2008.
- The implementation date is April 7, 2008.
- Change request (CR) 5926 informs carriers and A/B MACs about the new HCPCS codes for 2008 that are both subject to, and excluded from, CLIA edits.
- The CLIA requires a laboratory facility to be appropriately certified for each test it performs.
- To ensure that Medicare and Medicaid only pay for laboratory tests that are performed by certified facilities, carriers and A/B MACs will edit each Medicare claim submitted for a HCPCS code considered to be a CLIA laboratory test.
- These HCPCS codes change each year.
- The HCPCS codes listed in the chart on pages 2 and 3 in MLN Matters article MM5926 are new for 2008 and are subject to CLIA edits. The list does not include new HCPCS codes for waived tests or provider-performed procedures.
- The HCPCS codes listed in the chart require a facility to have either a CLIA certificate of registration (certificate type code 9), a CLIA certificate of compliance (certificate type code 1), or a CLIA certificate of accreditation (certificate type code 3).

- A facility without a valid, current, CLIA certificate, with a current CLIA certificate of waiver (certificate type code 2), or with a current CLIA certificate for provider-performed microscopy procedures (certificate type code 4) will not be paid for these tests and the claims will be denied.
- Failure to submit a CLIA number on claims containing one of these HCPCS codes will result in the Medicare Carrier or A/B MAC returning the claim as unprocessable.

**Note:** The HCPCS code 86586 [Unlisted antigen, each] was discontinued on December 31, 2007. For 2008, the new HCPCS code 86486 [Skin test; unlisted antigen, each] is excluded from CLIA edits and does not require a facility to have any CLIA certificate.

### Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5926.pdf> on the CMS website.

The official instruction (CR5926) issued regarding this change may be found at

<http://www.cms.hhs.gov/Transmittals/downloads/R1471CP.pdf> on the CMS website.

If providers have questions, they may contact their Medicare Carrier or A/B MAC at their toll-free number, which may be found at

<http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.