

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



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MLN Matters® Number: MM8837

Related Change Request (CR) #: CR 8837

Related CR Release Date: August 29, 2014

Effective Date: April 1, 2014

Related CR Transmittal #: R3056CP

Implementation Date: December 1, 2014

Sample Collection Fee Adjustment for Clinical Laboratory Fee Schedule and Laboratory Services

Provider Types Affected

This MLN Matters® Article is intended for independent clinical laboratories, skilled nursing facilities (SNFs) and home health agencies (HHAs) submitting claims to Medicare Administrative Contractors (MACs) for services to Medicare beneficiaries.

What You Need to Know

Change Request (CR) 8837 provides instructions to MACs for adjusting payment for a sample collected by a laboratory from an individual in a SNF or on behalf of a HHA. Make sure your billing staffs are aware of these changes.

Background

CR 8837 applies to Section 1833(h)(3)(A) of the Social Security Act, as amended by Section 216 of the Protecting Access to Medicare Act (PAMA) (P.L. 113-93), and the "Medicare Claims Processing Manual," Chapter 16, Section 60.1, which is available at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c16.pdf> on the Centers for Medicare & Medicaid Services (CMS) website.

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When a sample is collected by a laboratory from an individual in a SNF or from an individual on behalf of a HHA, the Healthcare Common Procedure Coding System (HCPCS) code, G0471 “Collection of venous blood by venipuncture or urine sample by catheterization from an individual in a SNF or by a laboratory on behalf of a HHA,” is used. Effective April 1, 2014, the nominal fee is increased by \$2, from \$3 to \$5, in accordance with the Protecting Access to Medicare Act (PAMA).

The “Sample Collection Fee” is raised from \$3.00 to \$5.00 ONLY when the following statements apply:

- The sample is being collected by a laboratory technician that is employed by the laboratory that is performing the test, and
- The sample is from an individual in either a SNF or a HHA.

MACs will not search their files to adjust claims already processed. However, they will adjust such claims that you bring to their attention.

Additional Information

The official instruction, CR 8837 issued to your MAC regarding this change is available at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3056CP.pdf> on the Centers for Medicare & Medicaid Services (CMS) website.

If you have any questions, please contact your MAC at their toll-free number. That number is available at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Net/work-MLN/MLNMattersArticles/index.html> under - How Does It Work.

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