

MLN Matters Number: MM6287 Revised Related Change Request (CR) #: 6287

Related CR Transmittal #: R1652CP Implementation Date: January 5, 2009

New Waived Tests

Note: This article was revised on April 11, 2018, to update Web addresses. All other information remains the same.

Provider Types Affected

Clinical laboratories and providers that submit claims to Medicare carriers and/or Medicare Administrative Contractors (MACs) for laboratory test services provided to Medicare beneficiaries.

Provider Action Needed

This article is based on Change Request (CR) 6287 and alerts providers that the Centers for Medicare & Medicaid Services (CMS) has listed the latest tests approved by the Food and Drug Administration as waived tests under Clinical Laboratory Improvement Amendments of 1988 (CLIA). The tests newly added to the waived tests are in the table on page 2 of this article. Be sure your billing staffs are aware of these changes.

Background

CLIA regulations require a facility to be appropriately certified for each test performed. To ensure that Medicare & Medicaid only pay for laboratory tests categorized as waived complexity under CLIA in facilities with a CLIA certificate of waiver, laboratory claims are currently edited at the CLIA certificate level. CMS identifies CLIA waived tests by providing an updated list of waived tests to the Medicare contractors on a quarterly basis via a Recurring Update Notification. To be recognized as a waived test, some CLIA waived tests have unique HCPCS procedure codes and some must have a QW modifier included with the HCPCS code.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2008 American Medical Association.

For a list of specific HCPCS codes subject to CLIA, see http://www.cms.gov/Regulations-and-
Guidance/Legislation/CLIA/downloads/waivetbl.pdf .

Key Points of CR6287

• Listed below are the latest tests approved by the Food and Drug Administration as waived tests under CLIA. The Current Procedural Terminology (CPT) codes for the following new tests must have the modifier QW to be recognized as a waived test. However, the tests mentioned on the first page at http://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/downloads/waivetbl.pdf (i.e., CPT codes: 81002, 81025, 82270, 82272, G0394, 82962, 83026, 84830, 85013, and 85651) do not require a QW modifier to be recognized as a waived test.

CPT Code	Effective Date	Description
83036QW	October 11, 2007	Siemens Medical Diagnostics DCA Vantage Analyzer
81003QW	May 28, 2008	Henry Schein OneStepPlus Urine Analyzer
82274QW G0328QW	July 1, 2008	Germaine Laboratories Compliance Gold iFOB (immunological fecal occult blood) Test
82274QW G0328QW	July 1, 2008	Beckman Coulter Hemoccult ICT (K080812)
82274QW G0328QW	July 22, 2008	BTNX Inc. Rapid Response Immunolgical Fecal Occult Blood Test (IFOBT)
80101QW	July 31, 2008	Aventir Biotech LLC Home Check Multiple Drug Cup Test
80101QW	August 18, 2008	American Bio Medica Rapid TOX
83986QW	September 18, 2008	Common Sense Ltd. VA-SENSE Kit

For 2009, the new CPT code 87905 was developed for infectious agent enzymatic
activity other than virus (e.g., sialidase activity in vaginal fluid) testing. Therefore,
the CPT code assigned to the Gryphus Diagnostics BVBlue test and the Genzyme
Diagnostics OSOM BVBlue Test is changed to 87905QW with an effective date of
January 1, 2009.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2008 American Medical Association.

Providers please note that your contractor will not search their files to either retract
payment or retroactively pay claims processed before CR6287 is implemented.
However, they will adjust such claims if you bring them to your contractor's
attention.

Additional Information

If you have questions, please contact your Medicare contractor at their toll-free number which may be found at http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html.

The official instruction (CR6287) issued to your Medicare A/B MAC, or carrier is available at http://www.cms.gov/Regulations-and-guidance/Guidance/Transmittals/downloads/R1652CP.pdf.

Document History

- December 20, 2008 Initial article released.
- April 11, 2018 The article is revised to update Web addresses. All other information remains the same.

Copyright © 2017, the American Hospital Association, Chicago, Illinois. Reproduced with permission. No portion of the AHA copyrighted materials contained within this publication may be copied without the express written consent of the AHA. AHA copyrighted materials including the UB-04 codes and descriptions may not be removed, copied, or utilized within any software, product, service, solution or derivative work without the written consent of the AHA. If an entity wishes to utilize any AHA materials, please contact the AHA at 312-893-6816. Making copies or utilizing the content of the UB-04 Manual, including the codes and/or descriptions, for internal purposes, resale and/or to be used in any product or publication; creating any modified or derivative work of the UB-04 Manual and/or codes and descriptions; and/or making any commercial use of UB-04 Manual or any portion thereof, including the codes and/or descriptions, is only authorized with an express license from the American Hospital Association. To license the electronic data file of UB-04 Data Specifications, contact Tim Carlson at (312) 893-6816 or Laryssa Marshall at (312) 893-6814. You may also contact us at ub04@healthforum.com.

The American Hospital Association (the "AHA") has not reviewed, and is not responsible for, the completeness or accuracy of any information contained in this material, nor was the AHA or any of its affiliates, involved in the preparation of this material, or the analysis of information provided in the material. The views and/or positions presented in the material do not necessarily represent the views of the AHA. CMS and its products and services are not endorsed by the AHA or any of its affiliates.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2008 American Medical Association.