

Business Requirements

Pub. 100-04	Transmittal: 12	Date: October 24, 2003	Change Request 2924
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I. GENERAL INFORMATION

A. Background:

The Clinical Laboratory Improvement Amendments of 1988 (CLIA) require a facility to be appropriately certified for each test performed. A facility that has a CLIA certificate for provider-performed microscopy (PPM) procedures may only perform tests that are categorized as either PPM procedures or waived tests under CLIA.

The healthcare common procedure coding system (HCPCS) code G0026 (fecal leukocyte examination) was discontinued on December 31, 2002. For calendar year (CY) 2003, HCPCS code 89055 (Leukocyte count, fecal) was suggested as a possible code to be used for the discontinued G0026. However, under CLIA, the fecal leukocyte examination permitted for a PPM procedure certificate does not include a fecal leukocyte count. For CY 2003, Medicare contractors were instructed to permit the use of existing HCPCS code Q0111 (Wet mounts, including preparations of vaginal, cervical or skin specimens) for fecal leukocyte examination claims submitted by facilities with a valid PPM procedure CLIA certificate with dates of services on or after January 1, 2003, in Transmittal AB-03-127 (Change Request 2843).

The wording of the HCPCS code 89055 was revised for CY 2004 to read "Leukocyte assessment, fecal, qualitative or semiquantitative." The revised text meets the CLIA definition of the PPM procedure for the fecal leukocyte examination. This notification gives instructions on how a facility with a CLIA certificate for PPM procedures should submit claims for the fecal leukocyte examination beginning January 1, 2004.

B. Policy:

The preamble to the CLIA regulations published on April 24, 1995, (HSQ-216-FC), stated that the fecal leukocyte examination is a form of the wet mount examination and mentioned that this test met the criteria for inclusion in PPM procedures category. The CLIA regulations also require a facility to be appropriately certified for each test performed. To ensure that Medicare and Medicaid only pay for laboratory tests categorized as provider-performed microscopy (PPM) procedures or waived complexity under CLIA in facilities having a valid CLIA certificate for PPM procedures, laboratory claims are currently edited at the CLIA certificate level.

C. Provider Education:

Intermediaries and/or carriers shall inform affected providers by posting either a summary or relevant portions of this document on their Web site within 2 weeks. Also, intermediaries and/or carriers shall publish this same information in their next regularly scheduled bulletin. If they have a listserv that targets affected providers, they shall use it to notify subscribers that information about the payment for the fecal leukocyte examination under a CLIA certificate for PPM procedures beginning January 1, 2004, is available on their Web site.

II. BUSINESS REQUIREMENTS

Requirement #	Requirements	Responsibility
2924.1	The Medicare contractor shall permit the use of existing HCPCS code 89055 (Wet mounts, including preparations of vaginal, cervical or skin specimens) for fecal leukocyte examination claims submitted by facilities with a valid PPM procedure CLIA certificate with dates of services on or after January 1, 2004.	All Contractors
2924.2	Contractors need not search their files to either retract payment or retroactively pay claims, however, contractors should adjust claims if they are brought to their attention.	All Contractors

II. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. OTHER CHANGES: N/A

Citation	Change

V. SCHEDULE, CONTACTS, AND FUNDING

<p>Effective Date: January 1, 2004</p> <p>Implementation Date: January 1, 2004</p> <p>Pre-Implementation Contact(s): Kathy Todd (410) 786-3385</p> <p>Post-Implementation Contact(s): N/A</p>	<p>These instructions should be implemented within your current operating budget</p>
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