

Medicare Clinical Laboratory Fee Schedule (CLFS) Private Payor Data Collection and Reporting Policies

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Acronyms in this Presentation

ADLT Advanced Diagnostic Laboratory Test

AMA American Medical Association CBO Congressional Budget Office

CDLT Clinical Diagnostic Laboratory Test
CLFS Clinical Laboratory Fee Schedule

CLIA Clinical Laboratory Improvement Amendments
CMS Centers for Medicare & Medicaid Services
CPT AMA's Current Procedural Terminology

DNA Deoxyribonucleic Acid

EIDM Enterprise Identification Management

FDA Food and Drug Administration

HCPCS Healthcare Common Procedure Coding System

HHS Health and Human Services

MAC Medicare Administrative Contractor

MedCAC Medicare Evidence Development and Coverage Advisory Committee

NLA National Limitation Amount NPI National Provider Identifier OIG Office of Inspector General

PAMA Protecting Access to Medicare Act of 2014

PFS Physician Fee Schedule

RNA Ribonucleic Acid





Agenda

- Overview of Medicare Clinical Laboratory Fee Schedule (CLFS)
 Private Payor Data Collection and Reporting Policies
- 2. Overview of Data Collection System
- 3. Question & Answer Session





CLFS Requirements

- On June 17, 2016 CMS published its final rule implementing section 216 of the Protecting Access to Medicare Act of 2014, which added a new section, 1834A, to the Social Security Act
- Requires private payor rates paid to applicable laboratories for clinical diagnostic laboratory tests to be reported to CMS and used to calculate Medicare payment rates





Definition of Applicable Laboratory

Statutory Provision

- PAMA defines laboratories subject to the new reporting requirements ("an applicable laboratory") as having the majority of its Medicare revenues paid under the CLFS or the Physician Fee Schedule (PFS)
- Uses the Clinical Laboratory Improvement Amendments (CLIA) regulatory definition of laboratory
- Majority of Medicare revenues threshold





Definition of Applicable Laboratory (continued)

- National Provider Identifier (NPI) used to define applicable laboratory
- Tax Identification Number (TIN) required to report payment data
- Low Expenditure Threshold = \$12,500
- Majority of Medicare revenue and low expenditure thresholds are applied at NPIlevel
- Low expenditure threshold does not apply to single laboratory furnishing Advanced Diagnostic Laboratory Tests (ADLTs), with respect to the ADLTs they furnish (explained more on later slides)





Revisions to the Definition of Applicable Laboratory

Final Physician Fee Schedule rule¹ published in 2018 made two revisions to the regulatory definition of "Applicable Laboratory", effective January 1, 2019

- (1) Medicare Advantage plan payments are excluded from total Medicare revenues (the denominator of the majority of Medicare revenues threshold)
- (2) Hospital outreach laboratories that bill for their non-patient laboratory services using the hospital's NPI must use Medicare revenues from the Form CMS-1450 14x Type of Bill (TOB) to determine whether they meet the majority of Medicare revenues threshold and low expenditure threshold

¹ Physician Fee Schedule (PFS) final rule entitled <u>"Revisions to Payment Policies under the Medicare Physician Fee Schedule, Quality Payment Program and Other Revisions to Part B for CY 2019</u>" (CMS-1693-F)





Applicable Information

Includes:

- Specific Healthcare Common Procedure Coding System (HCPCS) code associated with the test
- Each private payor rate for which final payment has been made during a data collection period (by date of final payment)
- Number of tests performed for each private payor rate
 - Examples:
 - Multiple payment rates for the same test
 - Resolved Appeals
 - Non-contracted amounts for out-of-network laboratories or services
 - Final payments from secondary insurance payors





Applicable Information (continued)

- Applicable Information Does Not Include:
- Unresolved Appeals
- Payments that do not reflect specific HCPCS code-level amounts
- Remittances where the payor has grouped test-level payments into an encounter (claim-level) payment
- Denied Payments





Reporting Applicable Information

- TINs must report applicable information for all of its component applicable laboratories
- Voluntary reporting is not permitted (your lab must be applicable to submit data)
- Reporting applicable information is not discretionary





Private Payor Rate

- Includes
 - ALL payment rates
 - Final amount paid by a private payor for a CDLT after all private payor price concessions are applied
 - Only private payor payment rates for CDLTs paid for under the CLFS
 - Any patient cost sharing amounts, if applicable
- Does Not Include
 - Price concessions applied by a laboratory
 - > Example: Waiving of patient deductible and or coinsurance.
 - Information about denied payments



Current/Upcoming Data Collection and Reporting Schedule

- Data collection period: January 1, 2019 through June 30, 2019
- Data reporting period: January 1, 2020 through March 31, 2020
- Payment rates implemented: January 1, 2021

Subsequent data collection and reporting

- Same timeline for each update year
 - ➤ Example: For update year CY 2024; data collection = January 1, 2022 June 30, 2022 reporting = January 1, 2023 March 31, 2023.





CLFS Payment Methodology for CDLTs

- CMS will calculate a weighted median private payor rate for each test
- Weighted median becomes the new CLFS payment rate
- If CMS receives no applicable information for a given CDLT or ADLT CMS will use crosswalking or gapfilling to price the test





Limitation on Payment Reduction for Existing Laboratory Tests

Statutory Requirements

- Limits reduction of the payment amount for existing tests prior to the implementation of the private payor rate-based CLFS (as compared to the payment amount for the preceding year)
- For upcoming payment cycle three years reduction is limited to 15 percent
- To determine the application of the phased-in payment reduction limit for a test, the weighted median private payor rate calculated for CY 2021 would be compared to the CY 2020 weighted median private payor rate





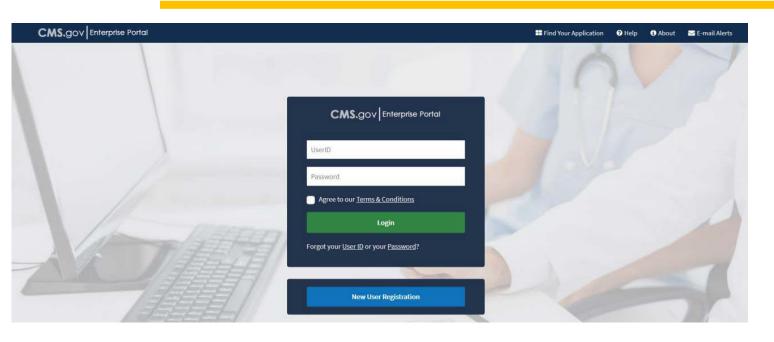
Confidentiality

- CMS and its contractors may not disclose reported applicable information in a form that would identify
 - A specific private payor or laboratory
 - Prices charged or payments made to a laboratory
- Exception: As CMS determines necessary to implement section 1834A of the Act and to permit the Comptroller General, the Director of the CBO, the HHS OIG, the MedPAC, or other law enforcement entities such as the Department of Justice to review the information





Registration – Choose system



Step #1: Choose Your Application

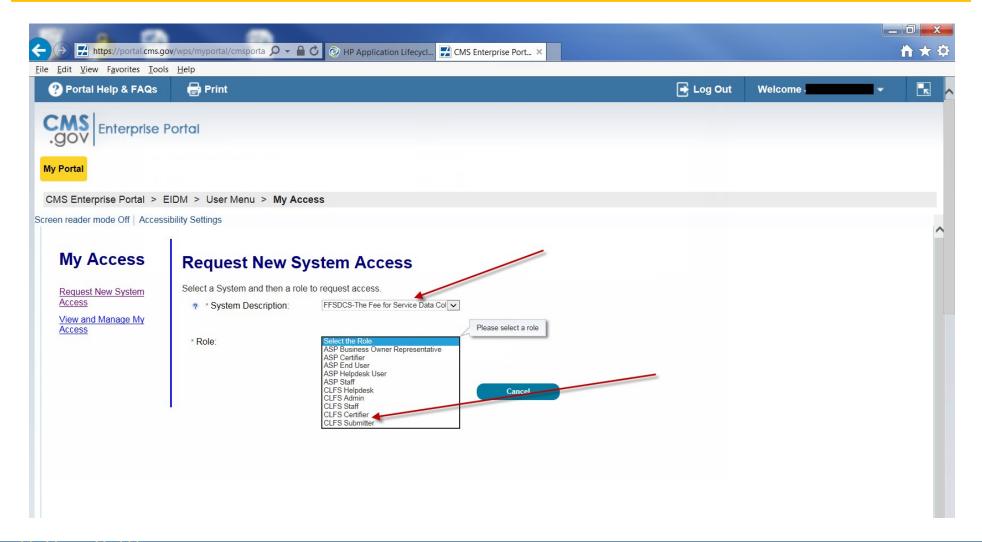
Step 1 of 3 - Select your application from the dropdown. You will then need to agree to the terms.

Choose Your Application •





Registration – Choose role







Registration – Role Approval

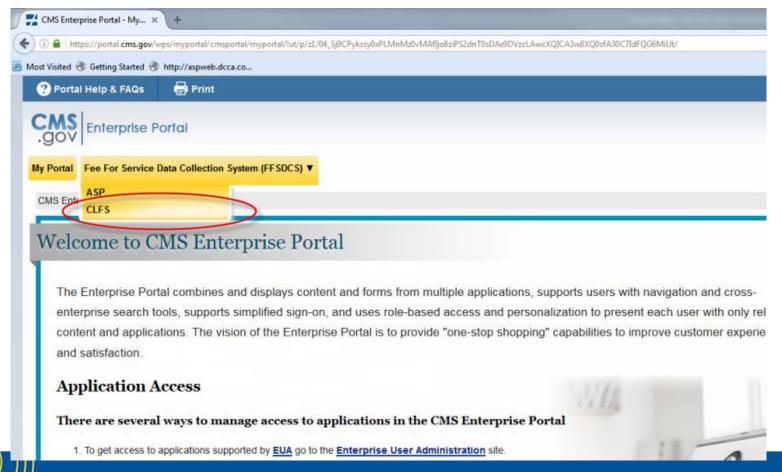
- After role submission Please wait up to 72 hours, you will receive an email notification.
- Points of contact:
 - Application HelpDesk
 - Email: CLFSHelpDesk@dcca.com
 - Phone: 844-876-0765
 - 9AM-6PM Eastern, Non-Peak
 - 9AM-9PM Eastern, Peak (i.e., January-March)
 - Issue examples:
 - Account Unlock
 - Password Reset
 - Registration process questions
 - Policy Question escalations
 - System Availability escalations
 - Other





Registration – Role Approval Success

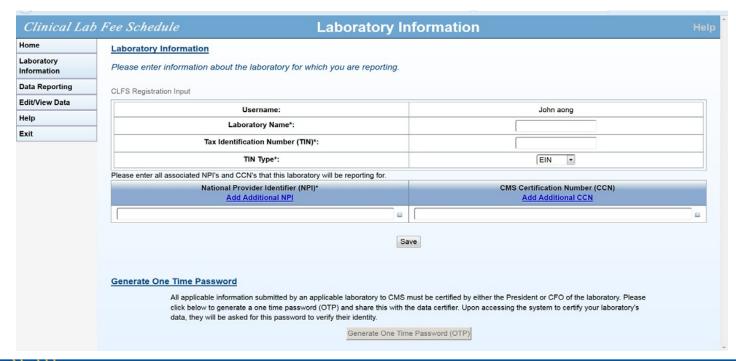
Choose CLFS system



CLFS Lab Registration

CLFS Submitter Role

- Applicable Laboratory Registration
 - Laboratory Name
 - Tax Identification Number (TIN) and type
 - All associated National Provider Identifiers (NPI)
 - All associated CMS Certification Numbers (CCN)



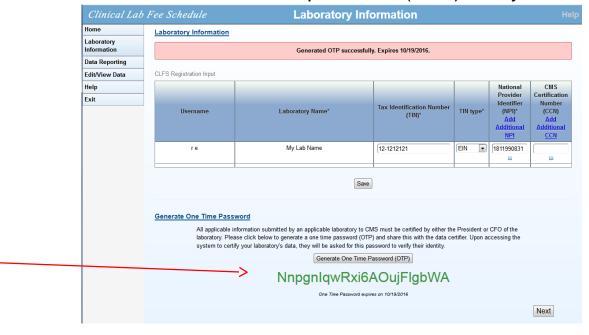




CLFS Lab Registration

CLFS Submitter Verification

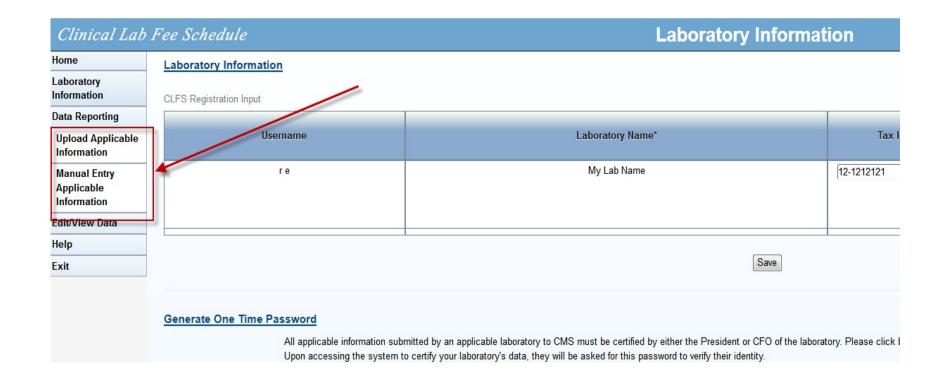
- Name of Submitter will be verified against the CMS Provider Enrollment Chain and Ownership System (PECOS) by the reporting TIN
- Your registration may require manual validation if the name verification fails.
 - Make sure PECOS is updated prior to EIDM registration
- Generate and share the one time password (OTP) with your certifier







Applicable Information Submission







Applicable Information Submission Methods

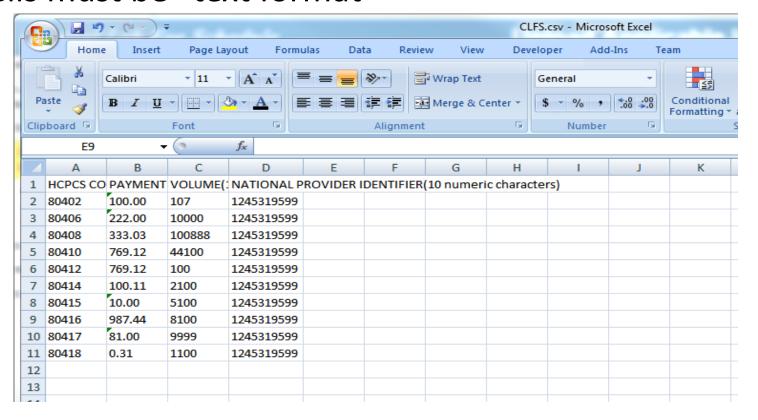
- Option 1: Data upload
 - CLFS Data Reporting Template: PAMA Download
 - .csv file (i.e. upload via excel or text file)
 - Best option for laboratories submitting a large amount of data
- Option 2: Manual Entry
 - Best option for laboratories with only a few HCPCS codes to submit





Data Submission Option 1a: – Data Upload via MS Excel

All cells must be "text format"







Data Submission Option 1b: Data Upload via Text Editor

```
File Edit Format View Help

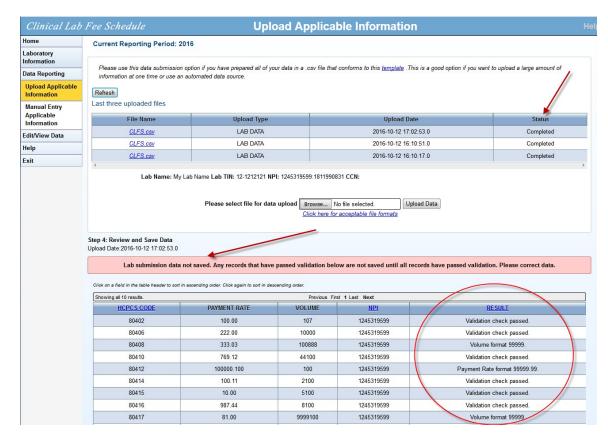
HCPCS CODE(5-alpha numeric characters), PAYMENT RATE(1-5 numeric characters and two decimal places), VOL 80402, 100. 00, 107, 1245319599
80406, 222. 00, 10000, 1245319599
80408, 333. 03, 100888, 1245319599
80410, 769. 12, 44100, 1245319599
80412, 100000. 100, 100, 1245319599
80414, 100. 11, 2100, 1245319599
80415, 10. 00, 5100, 1245319599
80416, 987. 44, 8100, 1245319599
80417, 81. 00, 9999100, 1245319599
80418, 0. 31, 1100, 1245319599
```





System validates data post-upload

- System checks data for formatting errors
 - HCPCS codes (5 alphanumeric)
 - Payment Rate (2 decimal places)
 - Volume (no decimal places)
 - NPI (10 digits)
- Fix errors on screen and re-validate
- All lines should read "Validation check passed)
- Data is automatically saved when data passed validation







CLFS Data Submission Option 2 (Manual Entry)

- Key in data for each entry
- Save when complete

Clinical Lab	linical Lab Fee Schedule Manual Entry Applicable Information					Help
Home	Current Reporting Period: 2016					
Laboratory Information	Please use this data submission option if you are submitting information on only a few tests or have minor additions to your uploaded data. If you have a large amount of information to submit, the File Upload data submission method may be a better option.					
Data Reporting						
Upload Applicable Information	Lab Name: My Lab Name Lab TIN: 12-1212121					
Manual Entry	NPI: 1811990831:1245319599					
Applicable Information	CCN:					
Edit/View Data	Save Add More					
Help	ID	HCPCS CODE	PAYMENT RATE	VOLUME	NPI	
Exit	1					
	2					
	3					
	4					
	5					
	Save Add More					

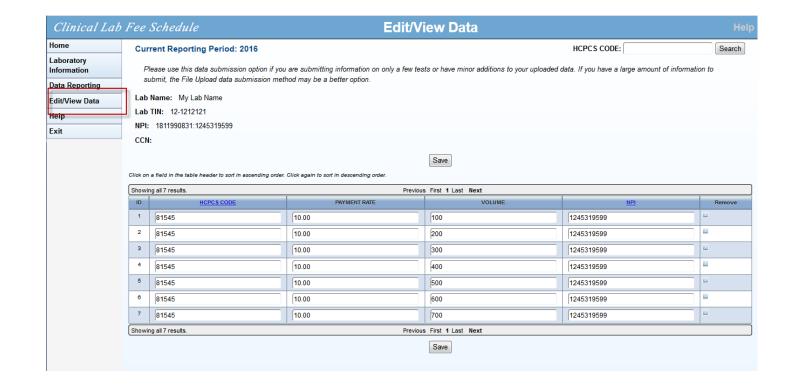




CLFS Data Corrections (Manual)

CLFS Submitter Role

Status
Validation
Corrections





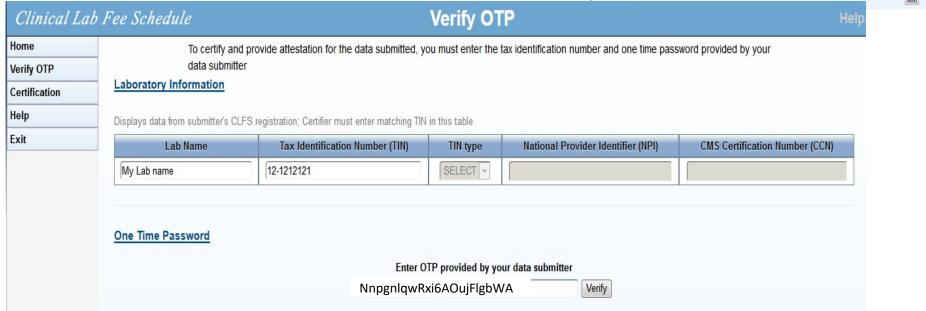


CLFS Data Certification - Registration

CLFS Certifier Role

- Registration
 Use One Time Password (OTP)
 from submitter
- Certification

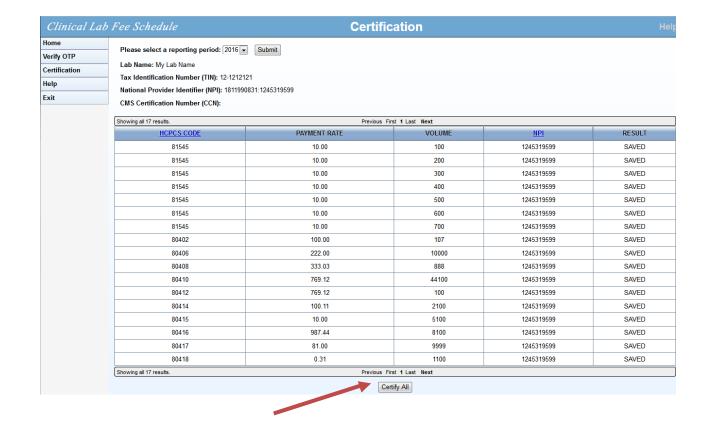






CLFS Data Certification

- CLFS Certifier Role
 - Registration
 - Certification







CLFS Data Certifier

- Cannot make edits to data
- If changes are necessary, certifier must inform Data
 Submitter
- Data Submitter must make any edits
- Once data are certified, they cannot be accessed by the laboratory





EIDM Registration

- Enterprise Identity Management
- Registration is open.
- Ready for data collection January 1, 2020.





CLFS Reference Material

On the **PAMA** webpage:

- CLFS Quick User Guide
- CLFS User Guide
- EIDM User Guide
- Data Template (Excel)
- Contextual Help

CLFS helpdesk: clfshelpdesk@dcca.com 844-876-0765





Resources

- <u>PAMA</u> webpage
- Submit questions to CLFS_Inquiries@cms.hhs.gov





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