

Quick Reference Guide for Determining Applicable Status of a Hospital Outreach Laboratory

Section 1834A of the Social Security Act (the Act), as established by section 216(a) of the Protecting Access to Medicare Act of 2014 (PAMA), requires applicable laboratories to report applicable information to CMS for each clinical diagnostic laboratory test that the laboratory furnishes. On February 3, 2026, section 6226 of the Consolidated Appropriations Act (CAA) was passed, announcing that the next data reporting period would be from May 1, 2026, to July 31, 2026, and is based on an updated data collection period of January 1, 2025, through June 30, 2025. **Because CMS cannot verify all information to determine applicable lab status, Hospital outreach laboratories are asked to determine whether they are applicable labs and, if so, are required to report.** Here is helpful guidance for laboratories on determining whether their facilities qualify as applicable laboratories during the collection period.

PLEASE NOTE: If you bill Part B under the hospital's NPI determine applicable laboratory status based on its Medicare revenues from the 14x TOB, you'll most likely meet the majority of Medicare revenues threshold. You'll most likely meet the majority of Medicare revenues threshold because your Medicare revenues are primarily, if not entirely, derived from the CLFS and or PFS.

