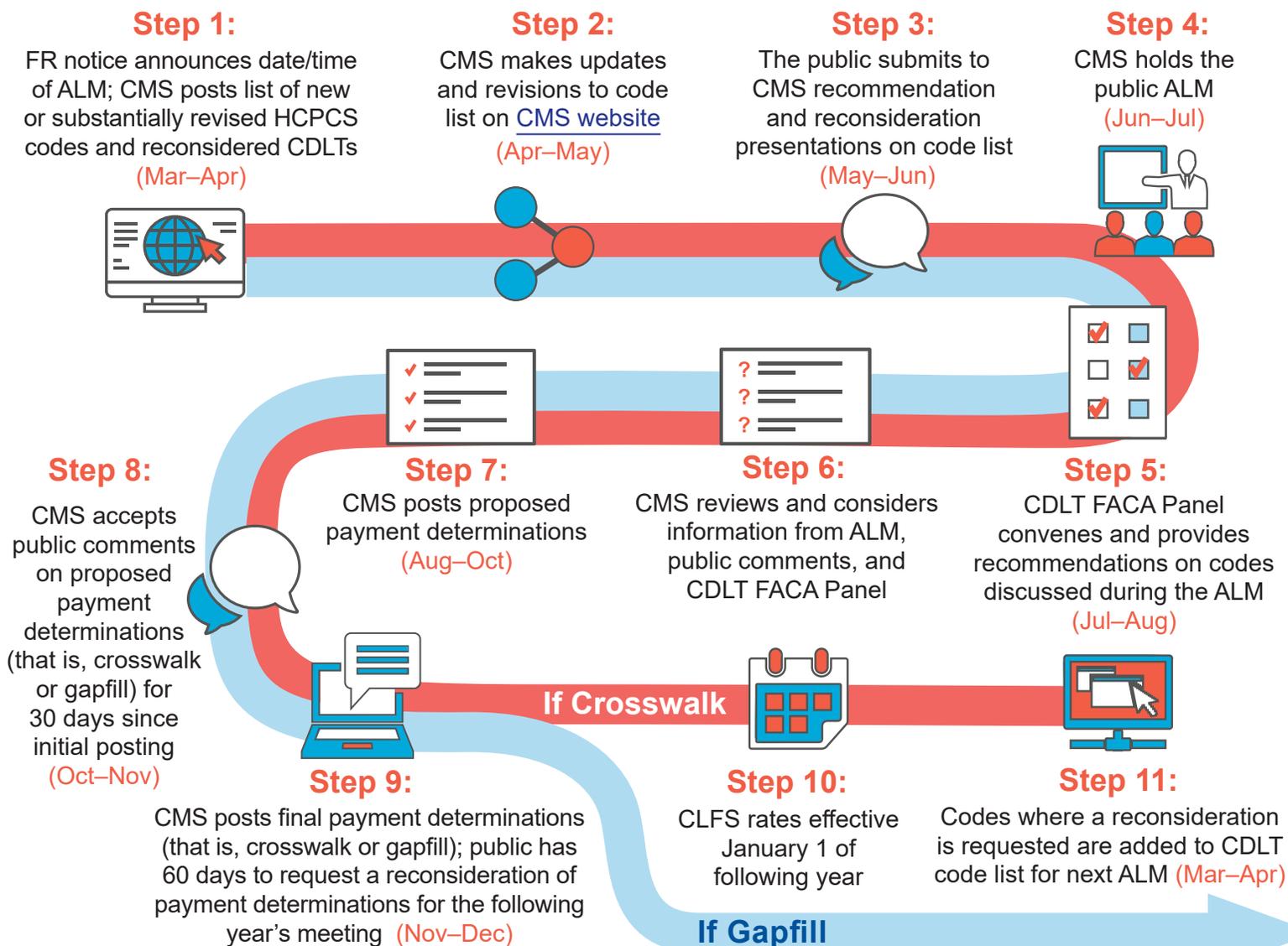


CLINICAL LABORATORY FEE SCHEDULE ANNUAL PAYMENT DETERMINATION PROCESS

Please note that the information and dates referenced in this publication are subject to change. For more detailed guidance, please refer to [42 CFR § 414.506](#), [42 CFR § 414.508](#), [42 CFR § 414.509](#), and [Social Security Act § 1833\(h\)\(8\)](#), [§ 1834A\(c\)](#) and [§ 1834\(A\)\(f\)](#).

NEW, RECONSIDERED, AND REVISED HCPCS CODE PROCESS



FR = Federal Register
 CMS = Centers for Medicare & Medicaid Services
 CDLT = Clinical Diagnostic Laboratory Test
 CLFS = Clinical Laboratory Fee Schedule

ALM = Annual Laboratory Meeting
 HCPCS = Healthcare Common Procedure Coding System
 FACA = Federal Advisory Committee Act

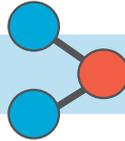
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GAPFILL PROCESS



Step 1:

CMS posts final payment determinations which indicates if a code is to be gapfilled
(Nov–Dec)



Step 2:

Gapfilled codes are denoted as contractor priced in the CLFS
(Jan)



Step 3:

MAC reports local MAC-specific gapfilled amounts for each test code and reports the amount to CMS
(Apr)



Step 6:

CMS posts final MAC-specific gapfill amounts online
(Sep)



Step 5:

CMS accepts public comments on MAC-specific payment amount for 60 days
(May–Aug)



Step 4:

CMS posts the MAC-specific payment amount recommendations reported by each MAC
(Apr–May)



Step 7:

Public has 30 days to submit written reconsideration requests in response to final gapfill recommendations
(Oct)



Step 8:

CMS implements a rate that is equal to the median of the MAC-specific amounts for the test code across all MACs over the past year
(Nov)



Step 9:

Final CLFS rates effective January 1 of following year

MAC = Medicare Administrative Contractor

For more information, refer to CMS' [CLFS Annual Public Meeting](#) webpage.

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