

## 2017 Clinical Laboratory Fee Schedule (CLAB) Public Use File (PUF) **Read Me File**

### **File Contents:**

17CLABv#.ZIP, a compressed file publically available online at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ClinicalLabFeeSched/Clinical-Laboratory-Fee-Schedule-Files.html>, includes the CLFS and supporting documents for Calendar Year (CY) 2017. Upon extraction, five separate files will become available:

- 1) **CLAB2017v#.xls**, an excel file containing CLAB fee schedule data;
- 2) **CLAB2017v#.txt**, a text file containing CLAB fee schedule data;
- 3) **CLAB2017v#.csv**, a comma delimited file containing CLAB fee schedule data;
- 4) **CLABREAD 2017.pdf**, a PDF which contains general information about the file's content, background, organization, update schedule, and record layout; and
- 5) **Loc & St Codes.xls**, an excel file containing carrier information.

In order to facilitate the distribution of pricing information for specimen collection services, this file contains pricing information for codes G0471, 36415, P9612 and P9615.

Current Procedural Terminology (CPT) codes 80002 through 80019 for 1-19 non-specified automated multi-channel test and codes G0058-G0060 for 20-22 or more tests were deleted in 1998. These codes were replaced by a new series of parallel HCFA payment codes (ATP02-ATP23).

The 2017 Clinical Laboratory Fee Schedule was completed according to the instructions issued in the most recent Change Request (CR) pertaining to the Calendar Year (CY) 2017 Annual Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment. The Program Transmittals can be accessed online at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/>.

### **Copyright Notice:**

CPT codes, and descriptions only are copyright 2017 American Medical Association. All Rights Reserved. Applicable FARS\DFARS Apply.

### **Record Layout:**

See Attachments A-1 and A-2.

Record Layout for the 2017 Clinical Laboratory Fee Schedule PUF  
**CLAB2017.xls & CLAB2017.csv**

Column	Name	Comment
1	HCPCS Code	All current year active CPT and alpha-numeric codes subject to the Clinical Laboratory Fee Schedule.
2	Modifier	Where modifier is shown, QW denotes a CLIA waiver test.
3	60% National Limitation Amount (NLA) (2017)	The 60% NLA is set at 74% of the 2017 median. The 62% NLA is calculated using the following algorithm: $((60\% \text{ NLA} / 0.60) * 0.62)$ . If the floor is applicable, then the NLA is appropriately adjusted.
4	60% Median (2017)	Median of the 2017 60% Updated Base Fee Amounts from all Medicare Part B Carriers.
5	60% Floor (2017)	BBRA of 1999 requires a payment floor for all Pap Smears; the 62% floor equals the 60% floor.

**Notes:**

- The 60% Pricing Amount is the lower of the NLA or the Updated Base Fee Amount. If the floor is applicable, then the pricing amount is appropriately adjusted.
- The 62% Pricing Amount is calculated using the following algorithm:  $((60\% \text{ Pricing Amount} / 0.60) * 0.62)$ . If the floor is applicable, then the pricing amount is appropriately adjusted.

Column	Carrier	State No.	State Name	Pricing Amount
F	CTR# 01112	51	Northern California	60% Pricing Amount
G	CTR# 01182	56	Southern Cal Occidental	60% Pricing Amount
H	CTR# 01212	27	Hawaii	60% Pricing Amount
I	CTR# 01312	28	Nevada	60% Pricing Amount
J	CTR# 02102	25	Alaska	60% Pricing Amount
K	CTR# 02202	47	Idaho	60% Pricing Amount
L	CTR# 02302	29	Oregon	60% Pricing Amount
M	CTR# 02402	30	Washington State	60% Pricing Amount
N	CTR# 03102	26	Arizona	60% Pricing Amount
O	CTR# 03202	16	Montana	60% Pricing Amount
P	CTR# 03302	20	North Dakota	60% Pricing Amount
Q	CTR# 03402	21	South Dakota	60% Pricing Amount
R	CTR# 03502	41	Utah	60% Pricing Amount
S	CTR# 03602	23	Wyoming	60% Pricing Amount
T	CTR# 04112	22	Colorado	60% Pricing Amount

U	CTR# 04212	05	New Mexico	60% Pricing Amount
V	CTR# 04312	06	Oklahoma	60% Pricing Amount
W	CTR# 04412	36	Texas	60% Pricing Amount
X	CTR# 05102	24	Iowa	60% Pricing Amount
Y	CTR# 05202	12	Kansas	60% Pricing Amount
Z	CTR# 05202	15	Kansas	60% Pricing Amount
AA	CTR# 05302	07	Missouri	60% Pricing Amount
AB	CTR# 05302	15	Missouri General Amer	60% Pricing Amount
AC	CTR# 05402	13	Nebraska	60% Pricing Amount
AD	CTR# 06102	43	Illinois	60% Pricing Amount
AE	CTR# 06202	45	Minnesota	60% Pricing Amount
AF	CTR# 06302	42	Wisconsin	60% Pricing Amount
AG	CTR# 07102	04	Arkansas	60% Pricing Amount
AH	CTR# 07202	08	Louisiana	60% Pricing Amount
AI	CTR# 07302	03	Mississippi	60% Pricing Amount
AJ	CTR# 08102	11	Indiana	60% Pricing Amount
AK	CTR# 08202	44	Michigan	60% Pricing Amount
AL	CTR# 09102	09	Florida	60% Pricing Amount
AM	CTR# 09202	46	Puerto Rico	60% Pricing Amount
AN	CTR# 10102	01	Alabama	60% Pricing Amount
AO	CTR# 10202	02	Georgia	60% Pricing Amount
AP	CTR# 10302	48	Tennessee	60% Pricing Amount
AQ	CTR# 11202	33	South Carolina	60% Pricing Amount
AR	CTR# 11302	40	Virginia	60% Pricing Amount
AS	CTR# 11402	35	West Virginia	60% Pricing Amount
AT	CTR# 11502	49	North Carolina	60% Pricing Amount
AU	CTR# 12102	38	Delaware	60% Pricing Amount
AV	CTR# 12202	39	District of Columbia	60% Pricing Amount
AW	CTR# 12302	37	Maryland	60% Pricing Amount
AX	CTR# 12402	19	New Jersey	60% Pricing Amount
AY	CTR# 12502	31	Pennsylvania	60% Pricing Amount
AZ	CTR# 13102	10	Connecticut	60% Pricing Amount
BA	CTR# 13202	18	Empire New York	60% Pricing Amount
BB	CTR# 13282	17	Western New York	60% Pricing Amount
BC	CTR# 13292	50	New York GHI	60% Pricing Amount
BD	CTR# 14112	52	Maine	60% Pricing Amount
BE	CTR# 14212	53	Massachusetts	60% Pricing Amount
BF	CTR# 14312	54	New Hampshire	60% Pricing Amount
BG	CTR# 14412	32	Rhode Island	60% Pricing Amount
BH	CTR# 14512	55	Vermont	60% Pricing Amount
BI	CTR# 15102	14	Kentucky	60% Pricing Amount

BJ	CTR# 15202	34	Ohio	60% Pricing Amount
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<b>Column</b>	<b>Name</b>	<b>Comment</b>
BK	Short Description	Formatted as a \$CHAR40. Or 40 character description of the applicable HCPCS code.

Record Layout for the 2017 Clinical Laboratory Fee Schedule PUF  
**CLAB2017.txt**

Field Name	Start/End Position	Picture	Comment
<b>Header Record (Lines 1 – 2)</b>			
Header Indicator	1-3	X(03)	Value 'HDR'
Filler	4-4	X(01)	Value ','
Copyright Statement	5-124	X(120)	
Filler	125-140	X(16)	
<b>Data Record (Lines 3 – 74,159)</b>			
Year	1-4	X(04)	2014'
Filler	5-5	X(01)	Value ','
HCPCS Code	6-10	X(05)	All current year active CPT and alpha-numeric codes subject to CLFS.
Filler	11-11	X(01)	Value ','
Modifier	12-13	X(02)	Where modifier is shown, QW denotes a CLIA waiver test.
Filler	14-14	X(01)	Value ','
Carrier Number	15-19	X(05)	
Locality	20-21	X(02)	State (e.g. 15-East Kansas/West Missouri)
Filler	22-22	X(01)	Value ','
60% Pricing Amount (2017)	23-30	99999.99	
Filler	31-31	X(01)	Value ','
62% Pricing Amount (2017)	32-39	99999.99	
Filler	40-40	X(01)	Value ','
60% National Limitation Amount (NLA) (2017)	41-48	99999.99	
Filler	49-49	X(01)	Value ','
62% National Limitation Amount (NLA) (2017)	50-57	99999.99	
Filler	58-58	X(01)	Value ','
60% Median (2017)	59-66	99999.99	
Filler	67-67	X(01)	Value ','
60% Pricing Amount (2017)	68-75	99999.99	

Filler	76-76	X(01)	Value ','
62% Pricing Amount (2017)	77-84	99999.99	
Filler	85-85	X(01)	Value ','
Gap Fill Indicator	86-86	X(01)	0-No Gap Filling Required 1-Carrier Needs to Gap Fill 60% and 62% Fee Schedules
Filler	87-87	X(01)	Value ','
Short Description	88-127	X(40)	
Filler	128-128	X(01)	Value ','
60% Floor (2017)	129-136	99999.99	BBRA of 1999 requires a payment floor for all Pap smears. The 62% floor equals the 60% floor.
Filler	137-140	X(04)	