CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2948	Date: May 2, 2014
	Change Request 8695

Transmittal 2916, dated March 28, 2014, is being rescinded and replaced by Transmittal 2948, dated May 02, 2014, to change the Implementation Date to read "On or before June 30, 2014". All other information remains the same.

SUBJECT: Calendar Year (CY) 2014 Annual Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment - REVISION

I. SUMMARY OF CHANGES: This Recurring Update Notification (RUN) provides instructions for the revised CY 2014 clinical laboratory fee schedule. This Recurring Update Notification applies to chapter 16, section 20.

EFFECTIVE DATE: January 1, 2014
*Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: On or before June 30, 2014

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)
R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	

III. FUNDING:

For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC statement of Work. The contractor is not obliged to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Recurring Update Notification

Attachment - Recurring Update Notification

| Pub. 100-04 | Transmittal: 2948 | Date: May 2, 2014 | Change Request: 8695 |

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EFFECTIVE DATE: January 1, 2014
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IMPLEMENTATION DATE: On or before June 30, 2014

I.   GENERAL INFORMATION

A.   Background: This Recurring Update Notification (RUN) provides instructions for the revised CY 2014 clinical laboratory fee schedule. This Recurring Update Notification applies to chapter 16, section 20.

B.   Policy: <u>Access to Data File</u>

The revised CY 2014 clinical laboratory fee schedule data file shall be retrieved electronically through CMS' mainframe telecommunications system. MACs shall retrieve the data file on or after February 28, 2014. Internet access to the CY 2014 clinical laboratory fee schedule data file shall be available after February 28, 2014, at http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ClinicalLabFeeSched/index.html?redirect=/ClinicalLabFeeSched/. Other interested parties, such as the Medicaid State agencies, the Indian Health Service, the United Mine Workers, and the Railroad Retirement Board, shall use the Internet to retrieve the CY 2014 clinical laboratory fee schedule. It will be available in multiple formats: Excel, text, and comma delimited.

<u>Pricing Information</u>

We are revising the CY 2014 clinical laboratory fee schedule to include several codes that were inadvertently left off of the previous CY 2014 fee schedule files. These codes, which were intended to be included on the original CY 2014 clinical laboratory fee schedule file, were recently given a "QW" modifier to both identify the codes and to determine payment for tests performed by a laboratory having only a certificate of waiver under the Clinical Laboratory Improvement Amendments (CLIA). Additionally, a technical oversight that led to the misstatement of several prices on the fee schedule has been addressed and all prices reflected on this file are now correct.

<u>Mapping Information</u>

The following existing codes have been recalculated so that their NLA and/or price for each contractor is correct:

80160

82017

82136

82139

82261

82270

82271

82271QW

82272

82272QW

82274

82274QW

82379

83013

83080

85576

85576QW

86355

86357

86359

86367

G0123

G0328

G0328QW

Existing code 86152 is priced at the 2013 contractor gap filled rate.

Existing code 86294 QW is priced at 100% of the midpoint in the NLA pricing.

II.   BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility

Number	Requirement	A/B MAC			D M E MAC	Shared-System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
8695.1	MACs shall retrieve the revised CY 2014 Clinical Laboratory Fee Schedule data file (filename: MU00.@BF12394.CLAB.CY14.V0228) from the CMS mainframe on or after February 28, 2014.		X							
8695.1.1	MACs shall notify CMS of successful receipt via e-mail to price_file_receipt@cms.hhs.gov stating the name of the file received and the entity for which it was received.		X							
8695.2	MACs shall retrieve the revised CY 2014 Clinical Laboratory Fee Schedule data file (filename: MU00.@BF12394.CLAB.CY14.V0228.FI) from the CMS mainframe on or after February 28, 2014.	X								
8695.2.1	MACs shall notify CMS of successful receipt via e-mail to price_file_receipt@cms.hhs.gov stating the name of the file received and the entity for which it was received.	X								
8695.3	Contractors shall not search their files to either retract payment or retroactively pay claims; however, contractors should adjust claims if they are brought to their attention.	X	X							

III.   PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E MAC	C E D I
		A	B	H H H		
8695.4	MLN Article : A provider education article related to this instruction will be available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.	X	X			

IV.   SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Glenn McGuirk, 410-786-5723 or Glenn.McGuirk@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):
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