



## Clinical Laboratory Fee Schedule Not Otherwise Classified, Not Otherwise Specified or Unlisted Service or Procedure Code Data Collection

MLN Matters Number: MM10232

Related Change Request (CR) Number: 10232

Related CR Release Date: October 13, 2017

Effective Date: January 16, 2018

Related CR Transmittal Number: R3881CP

Implementation Date: January 16, 2018

### PROVIDER TYPES AFFECTED

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This MLN Matters Article is intended for physicians, providers, and suppliers billing Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

### WHAT YOU NEED TO KNOW

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Change Request (CR) 10232 instructs MACs to assure that providers submit private payor data on unique tests currently being paid as a Not Otherwise Classified (NOC) code, Not Otherwise Specified (NOS) code, or Unlisted Service or Procedure code. Make your billing staff aware of this change.

### BACKGROUND

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Section 216(a) of the Protecting Access to Medicare Act of 2014 (PAMA) added Section 1834A to the Social Security Act (the Act), which requires revisions to the payment methodology for clinical diagnostic laboratory tests paid under the Clinical Laboratory Fee Schedule (CLFS). PAMA requires reporting entities to report private payor payment rates for laboratory tests and the corresponding volumes of tests. In compliance with PAMA, the Centers for Medicare & Medicaid Services (CMS) must collect private payor data on unique tests currently being paid as a Not Otherwise Classified (NOC) code, Not Otherwise Specified (NOS) code, or Unlisted Service or Procedure code.

In compliance with PAMA, CMS is collecting private payor data on unique tests currently being paid as a NOC code, NOS code, or unlisted service or procedure code. The update of the "Medicare Claims Processing Manual," Chapter 26, "Completing and Processing Form CMS-1500 Data Set," clarifies how providers of service or suppliers should populate field 19 of the form when billing NOC codes. Specifically, when billing for unlisted laboratory tests using a NOC code, field 19 must be populated with the specific name of the laboratory test(s) and/or a short descriptor of the test(s).

## ADDITIONAL INFORMATION

The official instruction, CR10232, issued to your MAC regarding this change is available at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2017Downloads/R3881CP.pdf>.

If you have any questions, please contact your MAC at their toll-free number. That number is available at <https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/Review-Contractor-Directory-Interactive-Map/>

## DOCUMENT HISTORY

Date of Change	Description
October 13, 2017	Initial article released.

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