#### **CLINICAL LABORATORY TESTING:**

#### **Life Saving Care Faces Crippling Cuts**



# **Protect Access to Life-Saving Laboratory Tests**

Despite significant reductions in Medicare payments for clinical laboratory services in recent years, new proposals before Congress suggest even deeper cuts, including to the Clinical Laboratory Fee Schedule, which faces a \$9.6 billion cut in the President's Fiscal Year 2014 Budget, among other proposals. Congress must protect laboratory services from future cuts that can threaten Medicare beneficiary access to life-saving diagnostics and treatment, potentially put American seniors at risk.

## ► THREAT #1: Untenable Reductions in Medicare Payments

Since 2009, Congress has passed three laws cutting Medicare payments for life-saving clinical laboratory services, which result in an up to 23 percent cut over the next ten years (2013-2022). Reasons for stopping additional Medicare cuts to clinical laboratory services include:

- 1. Clinical laboratory services have experienced a disproportionate level of cuts in recent years when compared to Medicare overall despite the fact that 70% percent of all clinical decisions in America are guided by clinical lab testing.
- **2.** Further erosion of Medicare payments for lab services will lead to patient access challenges, threaten needed health care jobs and hinder research and innovation.



#### ► THREAT #2: Unworkable Beneficiary Copayment

Calls for cost-sharing within the Medicare laboratory services benefit fail to recognize the unique environment in which laboratories operate, the patient population and the limited relationship labs have with the beneficiary.

- More than one-fourth of the Medicare beneficiaries laboratories serve are low-income and/or do not have supplemental insurance, signaling that these copays would be difficult to collect.
- **2.** Patients rarely interact with the laboratory that performs their tests, therefore offering no direct contact with the beneficiary to collect a copayment.
- **3.** The cost of collecting the copayment will outweigh the copay itself, meaning labs will lose money before the first collection attempt.

## ► THREAT #3: Unsuitable Competitive Bidding Policy

The expansion of competitive bidding to laboratory services is a flawed policy, which has proven to be so complex and difficult to implement that Congress repealed a CMS demonstration project for lab services in 2008. These same reasons exist for preventing a competitive bidding policy today:

- **1.** Laboratory services are extremely specialized and cannot all be provided by one single lab in one geographic location.
- **2.** Laboratory services are distinctly different from devices and should be treated differently.
- **3.** Competitive bidding policies do not affect provider behavior or beneficiary utilization.

