

CMS CLIA Update



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Division of Clinical Laboratory Improvement and Quality April 10, 2024

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CMS DCLIQ REORGANIZATION

- DCLIQ Reorganization--what has changed:
- 2 Policy Branches and 3 Operations Branches have been restructured
- New structure consists of 5 branches along the primary product lines:
 - Survey Branch
 - Enforcement Branch
 - Logistics Branch
 - Regulations and Clearance Branch
 - State Oversight Branch





CMS DCLIQ REORGANIZATION

Division of Clinical Laboratory Improvement and Quality (FCGGB)

1 Director - Gregg Brandush

Elysse Lessner Scott Stacy Karen Sutterer Penny Keller Cheryl Dobbe

DCLIQ Survey Branch (FCGGBA)

Branch Manager – Daniel Hesselgesser DCLIQ Enforcement Branch (FCGGBB)

Branch Manager – Latoya Laing Logistics Branch (FCGGBC)

Branch Manager – Karen Fuller Regulations and Clearance Branch (FCGGBD)

Branch Manager – Angelique Daubert State Oversight Branch (FCGGBE)

Branch Manager – Raelene Perfetto





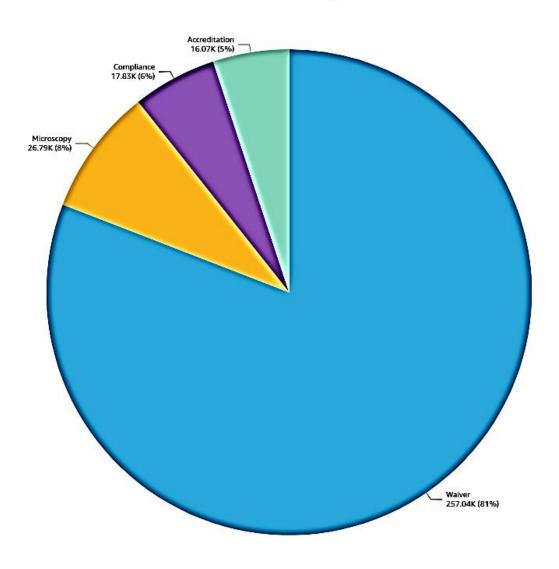
How many labs are there?

Approximate Number—Laboratories	317,740
Exempt States (New York and Washington)	14,508
Total Non-Exempt	303,232
CoC	17,833
CoW	257,043
CoA	16,073
PPM	26,791

Source: CMS database—February 2024

Visual Breakdown of Certificate Types

Current Certificate Types



CMS CLIA goals for 2023

- Improved processes
 - Use of data to identify outliers in terms of survey findings, time spent on survey, team size
 - Adherence to enforcement timelines
 - Enhanced state oversight activities
- Modernizing CLIA
 - PT Rule implementation
 - Electronic Certificates
- Assessing the use of enforcement discretion and flexibilities during the PHE:
 - Remote review of pathology slides/data
 - Expedited review of CLIA applications
 - Contiguous site flexibilities
 - University non-CLIA COVID testing
 - COW testing authorization as soon as CLIA application is filed
 - COVID test result reporting
- Continuing our stakeholder engagement efforts





Additional CMS accomplishments FY23

- Electronic Certificates and QCOR links
- CDC Data Exchange
- Fee rule
- RFI (Histopathology, Cytology, and Clinical Cytogenetics Regulations)
- Budget process
- Backlog plan
- Dashboards





A-19s

- Emergency Waiver Authority Proposal:
 - Would mirror Section 1135 of the Social Security Act that grants CMS the authority to waive regulations that are not explicit Statutory Requirements for providers and suppliers that comply with CMS regulations as a Medicare participation requirement
 - No corresponding CLIA authority in the PHSA
 - Would allow the CLIA program to respond more rapidly in times of emergency
 - Currently, the mechanism is enforcement discretion





Certificate of Compliance survey findings

Top Ten Conditions Nationwide (10/1/19 to 9/30/21):

Tag Number	Count	Tag Identification	
2016	1,263	Condition: Successful PT participation	
6000	839	Condition: Lab Director qualifications and responsibilities for moderate complexity testing	
		at 493.1405 and 493.1407.	
6076	452	Condition: Lab Director qualifications and responsibilities for high complexity testing at	
		493.1443 and 493.1445.	
5400	380	Condition: Analytic Systems—Must meet requirements at 493.1251-1289.	
2000	298	Condition: PT enrollment and testing of samples	
6033	257	Condition: Technical Consultant qualifications and responsibilities for moderate	
		complexity testing at 493.1411 and 493.1413.	
6063	230	Condition: Testing personnel qualifications and responsibilities for moderate complexity	
		testing at 493.1423 and 493.1425.	
6168	204	Condition: Labs performing high complexity testing; testing personnel	
3000	169	Condition: Facility Administration—must meet 493.1101-1105.	
6108	103	Condition: Technical Supervisor qualifications and responsibilities for high complexity	
		testing at 493.1449 and 493.1451.	

Certificate of Compliance survey findings

Top Ten Conditions Nationwide (10/1/21 to 9/30/23):

Tag Number	Count	Tag Identification	
2016	1,538	Condition: Successful PT participation	
6000	1,091	Condition: Lab Director qualifications and responsibilities for moderate complexity	
		testing at 493.1405 and 493.1407.	
6076	573	Condition: Lab Director qualifications and responsibilities for high complexity testing at	
		493.1443 and 493.1445.	
5400	547	Condition: Analytic Systems—Must meet requirements at 493.1251-1289.	
<mark>6033</mark>	350	Condition: Technical Consultant qualifications and responsibilities for moderate	
		complexity testing at 493.1411 and 493.1413.	
<mark>2000</mark>	342	Condition: PT enrollment and testing of samples	
6168	258	Condition: Labs performing high complexity testing; testing personnel	
6063	253	Condition: Testing personnel qualifications and responsibilities for moderate	
		complexity testing at 493.1423 and 493.1425.	
3000	218	Condition: Facility Administration—must meet 493.1101-1105.	
6108	136	Condition: Technical Supervisor qualifications and responsibilities for high complexity	
		testing at 493.1449 and 493.1451.	

Certificate of Compliance survey findings

Top Ten Conditions Nationwide (10/1/23 to 2/29/24):

Tag Number	Count	Tag Identification	
2016	234	Condition: Successful PT participation	
6000	166	Condition: Lab Director qualifications and responsibilities for moderate complexity	
		testing at 493.1405 and 493.1407.	
6076	100	Condition: Lab Director qualifications and responsibilities for high complexity testing at	
		493.1443 and 493.1445.	
5400	76	Condition: Analytic Systems—Must meet requirements at 493.1251-1289.	
6033	55	Condition: Technical Consultant qualifications and responsibilities for moderate	
		complexity testing at 493.1411 and 493.1413.	
2000	75	Condition: PT enrollment and testing of samples	
6033	55	Condition: Technical Consultant qualifications and responsibilities for moderate	
		complexity testing at 493.1411 and 493.1413.	
6063	55	Condition: Testing personnel qualifications and responsibilities for moderate complexity	
		testing at 493.1423 and 493.1425.	
3000	26	Condition: Facility Administration—must meet 493.1101-1105.	
6108	21	Condition: Technical Supervisor qualifications and responsibilities for high complexity	
	<u></u>	testing at 493.1449 and 493.1451.	

CMS CLIA goals for 2024

Year One Goals	Year Three Goals	Year Five Goals
 50% of CLIA certificates will be electronic and available online Issue Interpretive Guidance on the new Fee, histocompatibility, Personnel and Alternative Sanction rule. Initiate action plan to address data that demonstrates survey inconsistencies related to team size, time spent on survey, citation rates. Track enforcement actions to ensure consistency Make CLIA Certificate of Compliance survey findings available of QCOR 	 Implement Lab Director University Revise enforcement letters for plain language and readability Assess state budget allocations for consistency and fairness 	 Develop other educational resources such as Technical Supervisor University, Technical Consultant University, etc. Develop standardized survey process that is objective, consistent and computer assisted.





New Guidance

Three memos were released since the last meeting:

- QSO-24-03-CLIA Final Rule (Fee, Histocompatibility, Personnel, Alternative Sanctions)
- Admin Info: 24-09-CLIA (Onsite/Offsite Follow-up/Revisit Guidance)
- Admin Info: 24-08-CLIA (Survey Team Composition and Workload Report)

Additional questions?

Thank you!

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