

PAMA Reporting Window Opens May 1—What Labs Need to Know

On Thursday, March 12, the Centers for Medicare and Medicaid Services (CMS) released updated information for applicable laboratories to report private payor data under the often delayed Protecting Access to Medicare Act (PAMA).

Recently enacted legislation pushed out cuts to the Clinical Laboratory Fee Schedule (CLFS) to at least January 2027 and updated the period over which “applicable laboratories” are required to report.

Between May 1-July 31 this year, applicable laboratories are required to report private payor data for the first six months of 2025. A wealth of information has been provided on the [reporting page](#).

ASCLS has participated in three briefings with CMS administrators in the last two months along with our partners in the Clinical Laboratory Coalition. There are some very important items of note:

- CMS will contact laboratories they believe are required to report, but applicable laboratories are required to report whether they are contacted by CMS or not. PAMA does provide for civil monetary penalties levied by the agency against applicable laboratories who fail to report.
- Each laboratory reporting must have one person who can serve as a submitter and another who can serve as the certifier. The reporting page will walk you through that process. Some previous reporters or certifiers may already have user names in the system.
- ASCLS advises that laboratory leaders become familiar with this process before starting the reporting process. This process may not always be intuitive, and laboratories should carefully read all information, including the User Guides from CMS before proceeding.
- There is a help desk setup to handle issues. One anticipated issue is that a laboratory’s National Provider Identification (NPI) can only be claimed by one person. If someone has claimed that NPI during the initial reporting several years ago, and that person is no longer the submitter or certifier, the laboratory is advised to contact the CMS Help Desk.
- Make sure submissions are correct and complete before certification. Once certified, data will no longer be available to update.
- Each entity with a Taxpayer ID Number (TIN) has to upload data using the provided template. The data needs to be organized by NPI, but multiple NPIs can be reported under one TIN in a single upload.

Once data collection is complete, CMS will compile and report on what the weighted median price is for each test code by early fall. For newer tests where they may not be any data reporting, a federal advisory committee will be convened to set those process via “cross walk” or “gap fill” methodology.

The RESULTS Act, which would permanently replace this process with a more accurate representation of the market, is still under consideration in Congress. There has been positive movement in light of the House Energy & Commerce Committee hearing on the bill. CMS is working to provide technical assistance for the legislation and the Congressional Budget Office will be providing a score to legislators. Both are important steps to achieving final passage of RESULTS.

ASCLS and our clinical laboratory partners are working together to put pressure on Congress to act through the [Stop Lab Cuts](#) campaign. To date, there have been more than 180,000 messages supporting RESULTS sent to Congress, but pressure will need to be greater over the summer and into fall.

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