State of California

Department of Industrial Relations

DIVISION OF WORKERS’ COMPENSATION



**Order of the Administrative Director of the**

**Division of Workers’ Compensation**

**Official Medical Fee Schedule**

**– Pathology and Clinical Laboratory Fee Schedule**

**Effective for Services Rendered on or after April 1, 2024**

Pursuant to Labor Code section 5307.1, subdivision (g), the Administrative Director of the Division of Workers’ Compensation orders that the pathology and clinical laboratory portion of the Official Medical Fee Schedule adopted in title 8, California Code of Regulations, section 9789.50, is adjusted to conform to changes to the Medicare payment system that were adopted by the Centers for Medicare & Medicaid Services (CMS) for calendar year 2024, Quarter Two. The update includes fee schedule changes identified in [CMS Transmittal 12519, Change Request CR 13541](https://www.cms.gov/files/document/r12519cp.pdf), dated February 22, 2024, which may be accessed on the Medicare website.

Medicare Data Source and Incorporation by Reference

Effective for services rendered on or after April 1, 2024, the maximum reasonable fees for pathology and clinical laboratory services shall not exceed 120% of the applicable fees set forth in the calendar year 2024 Quarter Two Medicare Clinical Laboratory Fee Schedule, contained in the electronic file “[24CLABQ2](http://www.cms.gov/apps/ama/license.asp?file=/files/zip/24CLABQ2.zip)” which is adopted and incorporated by reference.

Modification of, Order effective 1/1/2024 regarding COVID-19 Codes CPT 86409 / CPT 86413

In the Administrative Director Order dated January 2, 2024, two COVID-19 testing codes, CPT 86409 and CPT 86413, were adopted for continued use based on 120% of the California Medicare Administrative Contractor (MAC) price because the codes did not have national Medicare prices in the Clinical Laboratory file. The Medicare CLFS file in 24CLABQ2, has changed CPT 86409 and CPT 86413 from locally priced codes to national codes. Therefore, the prices set for these codes in the January 2, 2024 Order are effective only through March 31, 2024. The table is modified to reflect the ending date of the MAC-priced fees as follows:

| **COVID-19 Testing Codes and Specimen Collection Codes and Descriptors** | **Effective Dates** | **Maximum Workers’ Compensation Fee**  **(120% of Medicare Rate)** |
| --- | --- | --- |
| CPT 86409  Short Descriptor: NEUTRLZG ANTB SARSCOV2 TITER  Long Descriptor: Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID19]); titer | Services on or After  April 1, 2021  and on or before  March 31, 2024 | $95.53 |
| CPT 86413  Short Descriptor: SARS-COV-2 ANTB QUANTITATIVE  Long Descriptor: Severe acute respiratory syndrome coronavirus 2 (SARS-CoV2) (coronavirus disease [COVID-19]) antibody, quantitative | Services on or After  April 1, 2021  and on or before  March 31, 2024 | $61.72 |

Effective for services rendered on or after April 1, 2024, the maximum reasonable fees for the CPT 86409 and CPT 86413 shall not exceed 120% of the applicable fees set forth in CLFS 2024 Q2 file.

This Order is effective for services rendered on or after April 1, 2024 and shall be published on the website of the Division of Workers’ Compensation on the [Pathology and Clinical Laboratory webpage](https://www.dir.ca.gov/dwc/OMFS9904.htm#2).

**IT IS SO ORDERED**

Dated: March 29, 2024 /S/ GEORGE P. PARISOTTO\_\_\_\_\_\_

Administrative Director of the

Division of Workers’ Compensation