



## NILA and Provider Organizations Share Support for SALSA

***For Immediate Release***

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Today, the National Independent Laboratory Association (NILA), the American Association of Bioanalysts, and an additional 31 leading provider organizations sent a [letter](#) to congressional leadership calling for enactment of the Saving Access to Laboratory Services Act (SALSA) prior to the end of the calendar year. The bipartisan, bicameral legislation seeks to protect community and regional clinical laboratories from drastic cuts to reimbursement scheduled for January of 2024 and future years. Introduced by Senators Sherrod Brown (D-OH) and Thom Tillis (R-NC) and Representatives Gus Bilirakis (R-FL), Richard Hudson (R-NC), Brian Fitzpatrick (R-PA), Bill Pascrell (D-NJ), and Scott Peters (D-CA), SALSA will repair a flawed data reporting and rate setting methodology put in place by the Protecting Access to Medicare Act (PAMA) of 2014.

“NILA is proud to help lead a strong group of health care provider organizations who understand laboratories are essential to the provision of health care in the U.S. and seek to ensure our nation’s seniors continue to have access to the laboratory services they need,” said NILA Executive Director Mark Birenbaum, PhD. “NILA is grateful to the bipartisan sponsors of SALSA for making this a priority and calls on Congress to pass SALSA as soon as possible.”

PAMA sought to tie reimbursement rates under Medicare’s Clinical Laboratory Fee Schedule (CLFS) to rates paid by private payors, with clinical laboratories periodically submitting private rate information to the Centers for Medicaid & Medicare Services (CMS). However, initial data reporting did not accurately represent the entire laboratory market, resulting in drastic, unanticipated cuts to clinical laboratory reimbursement. Without Congressional action, laboratories will face additional cuts of as much as 15 percent to some of the most commonly ordered laboratory tests in January of 2024.

SALSA requires CMS to use a statistically representative sample of the entire laboratory market to determine CLFS rates for widely available diagnostic tests and puts in place protections against drastic rate cuts. SALSA will reduce the administrative burden on laboratories by requiring fewer laboratories to report private payor data and increasing the time between reporting periods from three to four years.

PAMA-related cuts have weakened our nation’s clinical laboratory infrastructure. Any additional cuts will continue to damage laboratories’ ability to provide essential services and to prepare for a future pandemic or other public health emergency. Congress has acted three times to halt PAMA-associated cuts to laboratory reimbursement. NILA looks forward to working with likeminded stakeholders alongside Congress to advance SALSA to permanently fix the flawed implementation of PAMA before the end of the year.

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*NILA members work in regional and community independent clinical laboratories across the United States performing laboratory testing for physicians, hospitals, skilled nursing facilities (SNFs), and other health care professionals. NILA members serve a wide variety of communities and patient populations—including rural areas, underserved urban neighborhoods, mid- and small-sized cities and municipalities, congregate facilities, and critical access hospitals.*