CLIA QUICK FACTS

Did You Know That??........

• **We are celebrating 20 years of Quality!***
  The CLIA Final Regulations were published on February 28, 1992.
• The impetus for CLIA was deaths from incorrectly read Pap tests.
• 70% of all medical decisions are based on a laboratory result.
• Every person is ‘touched’ by a laboratory throughout all the phases of life, from birth to death.
• CLIA has enrolled 230,000 laboratories; 33% perform moderate or complex testing and have onsite surveys by CMS or State survey personnel; 50% are physician offices; 85% perform < 2,000 tests/year.
• The ‘T’ in CLIA stands for Improvement. CLIA uses an educational approach which has demonstrated success in facilitating laboratories’ continuous quality improvement.
• CLIA oversight is a team effort among the CMS Central Office, Regional Offices and State Agencies.
• Laboratory testing represents 3% of Medicare payments, but all laboratories are covered by CLIA, regardless of payment method.
• There are approximately 4,000 laboratory tests available; over 1,000 conditions are now detectable by molecular technologies.
• CLIA is a tri-partite program; that is, it is administered by three HHS agencies: CMS, FDA, and CDC, with CMS having overall responsibility.
• CLIA is entirely user fee funded by certificate and survey fees (based on test volumes) from the regulated laboratories.
• CMS/CLIA collaborates ongoing with professional partners and stakeholders to enhance the level of oversight.