

## Millennium Laboratories, Inc. Urges Medicare to Reconsider the 2010 Physician Reimbursement for Point-of-Care Urine Drug Screen Devices

*Millennium CEO defends reasonable physician reimbursement of point-of-care urine drug screening as a critical diagnostic tool for healthcare practitioners and a further deterrent to drug abuse.*

SAN DIEGO, July 27 /PRNewswire/ -- [Millennium Laboratories, Inc.](#), a national, research-based medication monitoring company specifically focused on clinicians who treat chronic pain, strongly advocated for an increase in physician reimbursement for point-of-care urine drug screening at the Annual Clinical Laboratory Public Meeting of the [Centers for Medicare and Medicaid Services \(CMS\)](#) on July 22, 2010. As the only therapeutic drug monitoring company presenting, Millennium was continuing its advocacy campaign, launched in June of 2009, supporting fair reimbursement for point-of-care (POC) urine drug screen devices.

[James Slattery](#), Millennium Laboratories founder and CEO, explained the company's presence at the meeting. "We are advocating for a higher, though moderate, reimbursement level to physicians for performing drug screening tests. Millennium as a corporation has no financial stake in this argument. It is simply the right thing to do for all parties involved."

In 2009 CMS drastically cut reimbursement for point-of-care test (POCT) devices used in urine drug screening. Millennium Laboratories felt a responsibility to advocate on behalf of pain physicians, their patients and the public to preserve and safeguard reasonable reimbursement rates for clinicians performing drug screening to properly care for their patients and to meet increasingly stricter DEA enforcement.

Slattery asked the CMS on July 22nd to reconsider the reimbursements cuts, and he reaffirmed the company's position in previous Medicare meetings. Key points of his presentation included:

- A reminder that [President Obama's 2010 National Drug Control Strategy](#) (Office of National Drug Control Policy) states, "Screening for substance use should become more broadly implemented in the healthcare system."
- A study from Cornell University found that drug seeking patients were identified only 10% of the time, even after physicians were told that actors would be presenting to them as patients.(1)
- Several states now have or are proposing laws that doctors must do a urine drug test (UDT) before a pain prescription for an opioid is written. The DEA says that they must prevent drug abuse and diversion. Medicare lowered the reimbursement rates for drug screening in 2009 to below physicians' cost, making it difficult to conduct the necessary drug testing.
- Physicians have very few tools at their disposal for early detection of illicit drug use and drug diversion in patients. Limiting the physicians' reimbursement to levels three to four times below their cost, may lead to an increase in patient deaths, drug abuse, "doctor shopping" and drug diversion.

Prescription drug diversion and abuse cost public and private health insurers \$72.5 billion per year, much of which is passed to consumers through higher health insurance premiums ([2009 National Prescription Drug Threat Assessment](#) – Drug Enforcement Agency). The White House Office of

Management and Budget estimates that, including crime, loss of productivity and government anti-drug programs, the cost is \$300 billion a year.

Physicians in clinical practice agree. Dr. Weingarten, M.D., Comprehensive Pain Management Associates in New York, said, "All the clinical data and evidence is there that shows urine drug screening is an early drug abuse identifier and intervention technique that serves to protect patients' health and saves lives. UDT helps ensure appropriate treatment and medication use, reduces the risk of adverse events and, most important, optimizes therapeutic outcomes. It is a tool that not only helps and protects patients; it also helps to protect the public from the consequences and costs of crime associated with prescription drug abuse. Medicare must find a way to make drug testing feasible for physicians throughout the country and not make it cash negative for physicians to be able to fully take care of their patients and fully comply with state and DEA requirements."

#### About Millennium Laboratories

Millennium Laboratories is a national, research-based medication monitoring company whose test panels, technology, customer support, educational resources and experts are specifically focused on clinicians who treat chronic pain. The company has the only major Urine Drug Testing (UDT) laboratory exclusively utilizing the latest cutting-edge technology, Liquid Chromatography/Mass Spectrometry/Mass Spectrometry (LC-MS/MS). This allows Millennium to provide the *fastest turn-around time in the industry* for determining the presence and precise levels of drugs in a patient's urine, usually in one business day.

Located in San Diego's life sciences cluster, Millennium offers pain management practitioners industry-leading test accuracy in conjunction with clinical decision support through its RADAR Hotline 12 hours every business day. Millennium is the only reference laboratory certified as a training facility for toxicology scientists and operates as a unique research component of the University of California, San Diego's (UCSD) doctoral program in Pharmacy. Millennium serves as an industry, government and payer educator and a compassionate advocate for chronic pain sufferers throughout the United States. The company is accredited by The Joint Commission, receiving the Gold Seal of Approval™ for healthcare quality and safety. For more information, visit the Millennium Laboratories website, [www.becausepainmatters.com](http://www.becausepainmatters.com).

#### Reference:

1. Jung B, Reidenberg M. Physicians Being Deceived. *Pain Medicine*. 2007; 8(5): 433–437.

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