



TOMÁS J. ARAGÓN, MD, DrPH
Director and State Public Health Officer

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

February 8, 2024

TO: ALL NEWBORN SCREENING PROVIDER IN CALIFORNIA

FROM: GENETIC DISEASE SCREENING PROGRAM

This letter is to inform you of a proposed fee increase to the California Newborn Screening Program panel. Effective July 1, 2024, the California Department of Public Health will be increasing the all-inclusive Newborn Screening Program participation fee by \$15.00 per completed test panel. The participation fee is expected to increase from \$210.00 to \$225.00. The Department will still charge a separate \$1.00 for each Newborn Screening Test Requisition Form which includes the filter paper for collection of the Newborn Screening specimen.

The all-inclusive Newborn Screening Program participation fee is being increased by \$15.00 in accordance with the Health and Safety Code section 124977 (a) & (b). The change will be reflected in the regulation package **DPH-23-004**. The Office of Regulations will notify all stakeholders of the Public Notice of the Proposed Action, which will include the date and time of the Public Hearing for the Prenatal Screening Program regulation package, DPH-23-004.

Any invoice with a date of service prior to July 1, 2024 will still be processed with the old rate of \$210.00. There will be no change on the Diagnosis Code, but providers should expect to receive statements with the new rate of \$225.00 starting the month of July with the dates of service on and after July 1, 2024. The Diagnosis Code will be Z13228: Encounter for Screening for Other Metabolic Disorders Newborn Screening. The HCPCS Code is S3620: Newborn Screening Panel.

For Newborn Screening HCPCS Code and ICD-10-CM Diagnosis Code effective with the dates of service on or after July 1, 2024, the new fee rate is \$225.00.

Please note that the final fee increase amount will be determined in accordance with the rulemaking process and will be provided in the 2024-25 May Revision.

Providers cannot charge more than the regulated fee, however, they may charge up to \$6.00 for blood collection and handling.



Please visit the [NBS Program Information for Providers web page](https://www.cdph.ca.gov/Programs/CFH/DGDS/Pages/nbs/default.aspx) (https://www.cdph.ca.gov/Programs/CFH/DGDS/Pages/nbs/default.aspx) to stay up-to-date on current NBS Program information, materials and resources for providers. If you have any questions, please email the NBS Program at nbs@cdph.ca.gov. If you have any questions regarding invoices, please contact our Billing and Collection Unit at (279) 667-1609 or email at gdsp@cdph.ca.gov.

Thank you for partnering with CDPH/GDSP to provide screening to all babies born in California.