

Policies-Regional Health Laboratories

Billing

Client—Each month you will receive an itemized invoice/statement which will indicate the date of service, patient name, CPT code, test name, and test charge. Any discounts offered will be taken into account. Payment terms are net 30 days. When making payment, please include our invoice number on your check to ensure proper credit to your account.

Patient—Regional Health Laboratories can bill patient's insurance. To make advanced arrangements to have Regional Health Laboratories bill your patient's insurance, please include the following required billing information: responsible party, patient's name, insurance information (name, group number, and ID number), current address, zip code, phone number, Social Security number, and diagnosis code. Providing this information will avoid additional correspondence to your office at some later date. Please advise your patients that they will receive a bill for laboratory services from Regional Health Laboratories for any personal responsibility after insurance payment. VISA® and MasterCard® are acceptable forms of payment. We also will be billing all federal payors. If using federal insurance, please enclose ABN or document medical necessity.

Billing—CPT Coding

It is your responsibility to determine correct CPT codes to use for billing. While this catalog lists CPT codes in an effort to provide some guidance, CPT codes listed only reflect our interpretation of CPT coding requirements and are not necessarily correct. Particularly, in the case of a test involving several component tests, this catalog attempts to provide a comprehensive list of CPT codes for all of the possible components of the test. Only a subset of component tests may be performed on your specimen. You should verify accuracy of codes listed. Where multiple codes are listed, you should select codes for tests actually performed on your specimen.

REGIONAL HEALTH LABORATORIES ASSUMES NO RESPONSIBILITY FOR BILLING ERRORS DUE TO RELIANCE ON CPT CODES LISTED IN THIS CATALOG. For further reference, please consult the CPT Coding Manual published by the American Medical Association. If you have any questions regarding use of a code, please contact your local Medicare carrier.

Cancellation of Tests

Cancellations received prior to test setup will be honored at no charge. Requests received following test setup cannot be honored. A report will be issued automatically and charged appropriately.

Chain-of-Custody

Chain-of-custody, a record of disposition of a specimen to document who collected it, who handled it, and who performed the analysis, is necessary when results are to be used in a court of law. Regional Health Laboratories has developed packaging and shipping materials that satisfy legal requirements for chain-of-custody. This service is only offered for drug testing.

Compliance Policies

Regional Health Laboratories is committed to compliance with applicable laws and regulations such as the Clinical Laboratory Improvement Amendments (CLIA). Regulatory agencies that oversee our compliance include, but are not limited to, the College of American Pathologists (CAP), the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), the Food and Drug Administration (FDA), Occupational Safety and Health Administration (OSHA), and the Department of Transportation (DOT). Regional Health Laboratories develops, implements, and maintains policies, processes, and procedures throughout our organization which are designed to meet relevant requirements. In addition, Regional Health Laboratories has a robust internal and external audit and assessment program to monitor ongoing compliance. It is Regional Health Laboratories' expectation that clients utilizing our services will ensure their compliance with patient confidentiality, diagnosis coding, anti-kick back statutes, professional courtesy, CPT-4 coding, and other similar regulatory requirements.

Confidentiality of Results

Regional Health Laboratories is committed to maintaining confidentiality of patient information. To ensure Health Insurance Portability and Accountability Act of 1996 (HIPAA) compliance for appropriate release of patient results, Regional Health Laboratories has adopted the following policies:

Phone Inquiry Policy—One of the following unique identifiers will be required:

- Regional Health Laboratories' accession ID number for specimen; **or**
- Client account number from Regional Health Laboratories along with patient name; **or**
- Identification by individual that he or she is, in fact, "referring physician" identified on request form by Regional Health Laboratories' client

We appreciate your assistance in helping Regional Health Laboratories preserve patient confidentiality. Provision of appropriate identifiers will greatly assist prompt and accurate response to inquires and reporting.

Disclosures of Results

Under federal regulations, we are only authorized to release results to ordering physicians or other health-care providers responsible for the individual patient's care. Third parties requesting results, including requests directly from the patient, are directed to the ordering facility.

Fee Changes

Fees are subject to change without notification. Specific client fees are available by calling 1 of 5 hospital laboratories. Contact the laboratory performing the testing at:

- Rapid City Regional Hospital Laboratory: 605-755-8080
- Spearfish Regional Hospital Laboratory: 605-644-4007
- Sturgis Regional Hospital Laboratory: 605-720-2566
- Lead/Deadwood Regional Hospital Laboratory: 605-755-6116
- Custer Regional Hospital Laboratory: 605-673-2229

HIPAA Compliance

Regional Health Laboratories is fully committed to compliance with all privacy, security, and electronic transaction code requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Although Regional Health Laboratories cannot assure that individual clients will meet their own responsibilities under HIPAA, we are committed to sharing information and coordinating efforts toward that goal. All services provided by Regional Health Laboratories that involve joint efforts will be done in a manner which enables our clients to be HIPAA compliant.

Infectious Material

The Centers for Disease Control (CDC) in its regulations of July 21, 1980, has listed organisms/diseases for which special packaging and labeling must be applied. We are monitored by the Department of Transportation (DOT) to uphold shipping standards. Required special containers and packaging instructions can be obtained from us by using the "Request for Supplies" form. It is the responsibility of the shipping facility to meet these standards.

Shipping regulations require that infectious substances affecting humans be shipped in a special manner.

Informed Consent Certification

Submission of an order for any tests contained in this catalog constitutes certification to Regional Health Laboratories by ordering physician that: (1) ordering physician has obtained "Informed Consent" of subject patient as required by any applicable state or federal laws with respect to each test ordered; and (2) ordering physician has obtained from subject patient authorization permitting Regional Health Laboratories to report results of each test ordered directly to ordering physician.

Regional Health Laboratories on occasion forwards a specimen to an outside reference laboratory, most commonly Mayo Medical Laboratories. State law where such reference laboratory is located may require written informed consent for certain tests. Regional Health Laboratories will request that ordering physician pursue and provide such consent. Test results may be delayed or denied if consent is not provided. Any costs incurred will remain the obligation of ordering party.

Parallel Testing

Parallel testing may be appropriate in some cases to re-establish patient baseline results when converting to a new methodology at 1 of the Regional Health Laboratories. Contact the laboratory for further information at:

- Rapid City Regional Hospital Laboratory: 605-755-8080
- Spearfish Regional Hospital Laboratory: 605-644-4007
- Sturgis Regional Hospital Laboratory: 605-720-2566
- Lead/Deadwood Regional Hospital Laboratory: 605-755-6116
- Custer Regional Hospital Laboratory: 605-673-2229

Radioactive Specimens

Specimens from patients receiving radioactive tracers or material should be labeled as such. Specimens are not routinely tested at Regional Health Laboratories for background radioactivity. This radioactivity may invalidate the results of radioimmunoassays (RIA).

Referral of Tests to Another Laboratory

Specimens shipped to Regional Health Laboratories for referral to an outside laboratory should not be sent in a glass vial(s) due to restrictions set by many of the referral laboratories. Specimen should be poured off into a plastic, screw-capped vial(s) and properly identified prior to freezing. A specimen received frozen in a glass vial(s) may be subject to cancellation at the performing laboratory's discretion.

Reportable Disease

Regional Health Laboratories endeavors to comply with laboratory reporting requirements for each state health department regarding reportable diseases. We report by fax, form, or phone depending upon your individual state health department regulations. Regional Health Laboratories reports to South Dakota State Department of Health, and they contact the appropriate state health department based upon the state listed in the client address. We strive to cooperate with our clients so that we both comply with state regulations. If you need further information, please do not hesitate to contact Regional Health Laboratories at 605-755-8080.

Request for Physician Name and Number Regional Health Laboratories endeavors to provide high quality, timely results so patients are able to receive appropriate care as quickly as possible. While providing esoteric reference testing, there are times when we need to contact the ordering physician directly. The following are 2 examples:

- When necessary to the performance of a test, the ordering physician's name and phone number are requested as part of "Specimen Required." This information is needed to allow our physicians to make timely consultations or seek clarification of requested services. If this information is not provided at the time of specimen receipt, we will call you to obtain the information. By providing this information up front, delays in patient care are avoided.
- In some situations, additional information from ordering physician is necessary to clarify or interpret a test result. At that time, Regional Health Laboratories will request physician's name and phone number so that 1 of our staff can consult with the physician.

We appreciate your rapid assistance in supplying us with the ordering physician's name and phone number when we are required to call. Working together, we can provide your patients with the highest quality testing services in the shortest possible time.

Research Projects

Research projects will be approved on an individual basis. Please call Rapid City Regional Health Laboratory at 605-755-8080 for details.

Specimen Identification Policy

Regional Health Laboratories' policy states that all specimens received for testing must be correctly and adequately labeled to assure positive identification. Specimens must have 2 person-specific identifiers on the patient label. Person-specific identifiers may include: accession number, patient's first and last name and middle initial, unique identifying number (eg, medical record number) or date of birth. Specimens are considered mislabeled when there is a mismatch between the person-specific identifiers on the specimen and information accompanying the specimen (eg, computer system, request form, additional paperwork). When insufficient or inconsistent identification is submitted, Regional Health Laboratories will recommend that a new specimen be obtained, if feasible.

Specimen Rejection

All tests are unique in their testing requirements. To avoid specimen rejection or delayed turnaround times, please check the "Specimen Required" field within each test. You will be notified of rejected or problem specimens upon receipt.

Please review the following conditions prior to submitting a specimen to Regional Health Laboratories:

- Full 24 hours for timed urine collection
- pH of urine
- Lack of hemolysis/lipemia
- Specimen type (plasma, serum, whole blood, etc.)
- Specimen volume
- Patient information requested
- Patient/specimen properly identified
- Specimen container (metal-free, separation gel, appropriate preservative, etc.)
- Transport medium
- Temperature (ambient, frozen, refrigerated)

Specimen Volume

The "Specimen Required" section of each test includes preferred volume. Preferred volume has been established to optimize testing and allows the laboratory to quickly process specimen containers, present containers to instruments, perform test, and repeat test, if necessary. Many of our testing processes are fully automated; and as a result, this volume allows hands-free testing and our quickest turnaround time (TAT). Since patient values are frequently abnormal, repeat testing, dilutions, or other specimen manipulations often are required to obtain a reliable, reportable result. Our preferred specimen requirements allow expeditious testing and reporting.

When venipuncture is technically difficult or the patient is at risk of complications from blood loss (eg, pediatric or intensive care patients), smaller volumes may be necessary. Specimen minimum volume is the amount required to perform an assay twice, including instrument and container dead space.

When patient conditions do not mandate reduced collection volumes, we ask that our clients submit preferred volume to facilitate rapid, cost-effective, reliable test results. Submitting less than preferred volume may negatively impact quality of care by slowing TAT, increasing the hands-on personnel time (and therefore cost) required to perform test.

Regional Health Laboratories makes every possible effort to successfully test your patient's specimen. If you have concerns about submitting a specimen for testing, please contact the laboratory performing the test at:

- Rapid City Regional Hospital Laboratory: 605-755-8080
- Spearfish Regional Hospital Laboratory: 605-644-4007
- Sturgis Regional Hospital Laboratory: 605-720-2566
- Lead/Deadwood Regional Hospital Laboratory: 605-755-6116
- Custer Regional Hospital Laboratory: 605-673-2229

Supplies

All supplies must be provided by the client or will be provided by Regional Health Laboratories as pre-arranged by contract. Shipping boxes will be provided by the courier used. Test request forms are available free of charge. Please contact Rapid City Regional Hospital Laboratory at 605-755-8080 for forms or if you would like to order any additional supplies.

Test Result Call-Backs

Results will be phoned to a client when requested from the client (either on Regional Health Laboratories' request form or from a phone call to Regional Health Laboratories from the client). Call backs will be given for critical results only.

Time-Sensitive Specimens

Please contact the performing hospital laboratory prior to sending a specimen for testing of a time-sensitive nature. Relay the following information: facility name, account number, patient name, shipping information (ie, courier service, FedEx®, etc.), date to be sent, and test to be performed. Place specimen in a separate temperature appropriate bag. Please write "Expedite" in large print on outside of bag. Contact the laboratory performing the test at:

- Rapid City Regional Hospital Laboratory: 605-755-8080
- Spearfish Regional Hospital Laboratory: 605-644-4007
- Sturgis Regional Hospital Laboratory: 605-720-2566
- Lead/Deadwood Regional Hospital Laboratory: 605-755-6116
- Custer Regional Hospital Laboratory: 605-673-2229

Turnaround Time (TAT)

Regional Health Laboratories' extensive test menu reflects the needs of our own health-care practice. We are committed to providing the most expedient TAT possible to improve diagnosis and treatment. We consider laboratory services as part of the patient care continuum wherein the needs of the patient are paramount. In that context, we strive to fulfill our service obligations. Our history of service and our quality metrics will document our ability to deliver on all areas of service including TAT.

Regional Health Laboratories defines TAT as the analytical test time required. TAT is monitored continuously by each performing laboratory site within Regional Health's Department of Laboratory Medicine and Pathology. For the most up-to-date information on TAT for individual tests, please contact the laboratory performing the test at:

- Rapid City Regional Hospital Laboratory: 605-755-8080
- Spearfish Regional Hospital Laboratory: 605-644-4007
- Sturgis Regional Hospital Laboratory: 605-720-2566
- Lead/Deadwood Regional Hospital Laboratory: 605-755-6116
- Custer Regional Hospital Laboratory: 605-673-2229

Unsatisfactory Analytic Results

If Regional Health Laboratories is unable to obtain a satisfactory analytic result, there is no charge.