Billing

Physician offices and providers submitting specimens and requisitions to Munson Healthcare Laboratories are responsible for providing complete and accurate patient demographics, insurance information, and patient waivers when applicable. Munson Healthcare Laboratories will bill all applicable charges for clinical testing and the technical components of anatomic pathology and cytology testing. When incomplete billing information is provided, testing may be performed; but there may be a delay in results reporting.

Corresponding professional fees for anatomic pathology and cytology and other clinical pathology interpretations will be billed separately. Insurances are billed only when complete information is provided. When complete information is not provided, the patient may be billed directly.

Billing questions can be made directly to the performing laboratory or the Patient Accounts Office at the corresponding affiliate hospital. For professional billing questions, contact the Laboratory Pathology Department.

The following information is required for billing:

- Patient information:
  - —Legal name
  - —Date of birth
  - —Address
  - —Phone number
  - —Social Security number (or last 4 digits)
- Guarantor information:
  The guarantor is the person who is financially responsible for testing fees. A guarantor is required for patients under 18 years of age. Information needed:
  - —Full name
  - —Date of birth
  - —Address
  - —Phone number
  - —Relationship to patient
- Insurance information:
  Complete insurance information is needed. Complete the insurance section of the Laboratory Request Form or attach a photocopy (front and back) of all applicable insurance cards. Information needed:
  - —Insurance name, address, and type
  - —Policy holder name
  - —Policy holder address
  - —Contract, plan and group numbers
  - —Policy holder's employer
  - —Relationship to patient

  Please note that the guarantor and insurance information is automatically provided on the requisition generated by Electronic Medical Record (EMR) users and/or interfaced laboratory middleware users (Atlas Labworks).
- Diagnosis codes:
  - —ICD-9 diagnosis codes are REQUIRED for all laboratory tests. ICD-10 diagnosis codes will be required effective October 1, 2014. Providers are encouraged to order only tests that are medically necessary for diagnosis or treatment. Federal regulations require that all pertinent diagnoses must be supplied by the ordering provider **in writing or electronically**. Please provide the appropriate codes, listing the primary diagnosis first.
  - —A narrative description of presenting symptoms can also be submitted when the numerical code is unknown. If a diagnosis is not provided, the laboratory or registration staff will contact the ordering provider for this information.
- Medicare billing:
  - —Please send complete Medicare information. A copy of patient's insurance card or a printout from your practice management/billing system will help assure accurate billing. The hospital of the performing laboratory will bill Medicare.
  - —Medicare requires that when a test is ordered for which they have defined Local Coverage Determination (LCD), payment will be made for that test only when a payable diagnosis(es) from their approved LCD list is submitted. Some tests must also meet frequency requirements for payment to be made.

    When the diagnosis or frequency requirement is not met, the patient MUST be informed that payment may be denied by Medicare. The patient must sign an Advanced Beneficiary Notification (ABN) waiver form acknowledging that they were informed before the service was provided. For information on which tests require an ABN, how to correctly complete an ABN, or to order ABN forms, please contact your nearest hospital laboratory for assistance.
- Medicaid billing:
  - —Please send complete Medicaid information. A copy of patient's insurance card or a printout from your practice management/billing system will help assure accurate billing. The hospital of the performing laboratory will bill Medicaid.

- Third-party billing:
  - —The hospital of the performing laboratory will bill third-party payers directly only when complete billing information is provided. A copy of the patient's current insurance card(s) or a printout of the practice management system will help assure accuracy and enrollment verification when this information is not provided on the requisition.

  Note: Patient inquiries regarding coverage should be directed to their insurance company handbook. Munson Healthcare Laboratories participate with all insurances.
- Patient billing:
  - —The hospital of the performing laboratory can bill patients directly. Complete information including current mailing address is required.
- Client billing:
  - —The laboratory provides contract services with various healthcare providers. Client invoices are processed on a monthly basis with a 45-day payment term. For contractual client billing questions, please contact Client Services at the performing hospital laboratory.
- Laboratory fees:
  - —The fees for specific tests are available upon request by calling the performing hospital laboratory.

Requisitions

A paper or electronic requisition must accompany specimens submitted for testing. Outpatients must present a requisition at the time of service or their requisition must be available electronically or by fax. (Requisitions may be faxed in advance of outpatient services to 231-935-3203).

Requisitions must include the ordering provider name and address and TWO unique patient identifiers, one of which must be the patient's legal name (first, last and middle name or initial). The second unique identifier can be the patient's birth date, medical record number, last 4 digits of the Social Security number, etc. Patient identifiers on the requisition must exactly match those on the specimen label.

Specimen Labeling

Proper specimen identification and labeling is a critical step in the quality path of laboratory analytical processes. Each specimen submitted to the laboratory is assessed for accurate and complete identification and labeling. Specimens should ideally be labeled in the presence of the patient. **Specimen labeling must EXACTLY MATCH the patient information on the requisition**.

All specimens must be labeled with TWO identifiers:

- Patient's **legal first and last name** (middle name or initial if known)
- A **second patient-unique identifier**, such as birth date, medical record number, patient chart number, etc. is acceptable. This second identifier is a requirement specified by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and the College of American Pathologists (CAP).

Additional specimen labeling information:

- Collection date and time
- The following information should also be provided on the container when applicable:
  - —Specimen source or type (eg, culture site, tissue site)
  - —Collection duration (eg, 12 hours or 24 hours for timed urine)
  - —Collection time for serial draws (eg, 30 minute, 1 hour, 2 hour, 3 hour, etc.)
  - —Tube number in order of draw (eg, #1, #2, #3 for spinal fluid tubes)
  - —Preservative added (eg, acetic acid preservative added to 24-hour urine)

Blood Bank Specimens Labeling

Patient identification and specimen labeling are critical steps for safe transfusion of blood products. For patient safety reasons, specimens collected for compatibility testing must be hand-labeled in indelible ink from the patient's wristband (no exceptions) and must include all of the following information:

- Patient's full name spelled exactly as on the wristband
- Patient's medical record number
- Collection date
- Collection time
- Collector's initials

Specimens for Blood Bank testing may be collected on outpatients without a wristband for these tests only: Blood Type, Antibody Screen and/or Antibody Titer. Labeling must include these two identifiers:

- Patient's legal first and last name (middle initial if known)
- Patient's birth date or medical record number

Labeling must be in indelible ink. A printed label with two identifiers is acceptable for samples collected by office staff.

Specimen with labels that are illegible, missing any of the above information, or do not exactly match patient information on the requisition will be rejected and must be redrawn without exception.

Glass Slides must be labeled with the patient's legal first and last name. When dry, place slide(s) in a plastic or cardboard slide transport container.

Specimen Rejection

Specimen integrity is critical for quality laboratory analysis. On occasion, specimens may be rejected for any 1 or more of the conditions listed below. Every effort will be made to resolve problems and test submitted specimens whenever possible.

Specimen Rejection Related to Specimen Integrity
Any 1 of the following conditions may lead to specimen rejection:

- Specimen quality that interferes with testing methodology including hemolysis, icterus, clotting, lipemia, contamination, etc.
- Specimen collected in an inappropriate container
- Specimen collected in a container with inappropriate preservative or anticoagulant
- Specimen collected in a container without required preservative or anticoagulant
- Inappropriate specimen type submitted for test ordered
- Insufficient volume to perform test
- Improper storage temperature
- Delay in transit time
- Specimen leakage
- Improper or delayed pre-analytical processing (eg, centrifugation or refrigeration delay)

Specimen Rejection Related to the Request Form
A missing request form or a request form with illegible, unclear or incomplete orders, or a request form with information discrepant with the specimen label may lead to specimen rejection or a prolonged turnaround time for results. Specimens will be held until a requisition with matching patient information is received.

Specimen Rejection Related to Labeling: Clinical Laboratory
Specimens may be rejected for the following reasons related to labeling:

- Unlabeled specimen
- Incompletely labeled specimen (eg, missing first or last name or second identifier, etc.)
- Mislabeled specimen (eg, specimen labeling conflicts with request form)
- Illegible or ambiguous label

It is the responsibility of the sender to provide legible, accurately labeled specimens. When a specimen is received unlabeled, mislabeled, or the specimen label is discrepant from the request form information, **the best practice is to recollect the specimen**.

However, when circumstances are such that a specimen cannot be recollected or it is impossible to be recollected, it is the responsibility of the **sender** to correct the specimen labeling error or discrepancy. Laboratory staff cannot label specimens, cannot modify labels, and cannot accept verbal directives to perform or modify labeling.

When an unlabeled, mislabeled, or questionably labeled specimen is received from an office or clinic for clinical laboratory analysis, the following protocol will be followed:

- Laboratory staff will phone the office manager or physician to explain that a specimen failed to meet labeling requirements and , for best practices, will request that the specimen is re-collected.
- Office staff or physician will determine if specimen will be re-collected. If the specimen is to be re-collected, the original specimen submitted will be discarded.

The laboratory staff offers assistance for re-collection and will provide phlebotomy services in the patient's home, if necessary, to obtain the specimen.

For specimens that CANNOT be easily recollected: (eg, spinal fluid and other body fluids, pediatric specimens, timed tests, time-sensitive tests, or when specimen stability is of short duration, etc.) testing may be initiated, but results are held until specimen is properly labeled.

When a labeling problem is identified after the office has closed, laboratory staff will contact the office manager as early as possible the next business day to determine course of action as described above.

Specimens for which testing was initiated or completed for stability reasons will not be returned to the office for labeling. Office staff will be required to visit the laboratory to label such specimens.

Specimen Rejection Related to Labeling: Anatomic Pathology

It is recognized that specimens for anatomic pathology usually cannot be re-collected. When an unlabeled, mislabeled, or questionably labeled specimen is received for analysis in the Anatomic Pathology Laboratory (Histology and/or Cytology), the following protocol will be followed:

- **Specimen will be returned to originating provider for identification via courier.**
- Laboratory staff will call and inform the office that the specimen is being returned and the reason for return.
- Laboratory staff will prepare a "Send Back Form," place this form with the specimen and the original request form and document return of specimen to office.
- The courier will return specimen to the office, wait for specimen to be labeled, and then return specimen to laboratory with normal delivery route.
- After the properly labeled specimen is received, laboratory staff will document return receipt of specimen, and tests will be processed as usual if stability requirements have been met.

Test Additions

Tests may be added to a specimen provided the proper specimen is available, stability requirements are met, and sufficient volume exists to perform the test. Please call the performing hospital laboratory to request the additional test. The laboratory staff will record and read back the order to verify the order was accurately communicated. The following information is required to perform additional testing. The same information on a written order (fax is acceptable) with an authorized signature is required within 48 hours of the verbal request (JCAHO requirement):

- Patient name
- Collection date and time
- Test(s) to be added
- ICD-9 diagnosis code(s) or narrative
- Physician name/signature

Test Cancellations

Tests can be cancelled without charge if cancellation notification is received while specimens are in transit or before assay. Please phone the performing hospital laboratory to request test cancellation. If testing has been completed, requests for cancellation of charges will be referred to the laboratory leadership staff.