

Policies – Saint Francis Medical Center

Billing

Saint Francis Medical Center offers 3 alternatives for outreach laboratory service billing. You can select the billing type most convenient for you and your patients.

- Account billing
- Insurance/Medicare billing
- Patient billing

Please make sure all information required for us to bill the appropriate party is legible and complete. We would like to avoid interrupting you and your office staff to obtain missing information.

If you elect to have Saint Francis Medical Center bill your patients or their insurance, please include the following necessary patient billing information:

- Patient's name (first, last, and middle initial)
- Date of birth
- Sex
- Marital status
- Social Security number
- Patient address and telephone number
- Guarantor, guarantor address, and relationship to patient
- Insurance, insurance address, group/policy number
- Diagnosis
- Physician (and address if not on staff)

If you elect to have Saint Francis Medical Center bill Medicare, please include the following information:

- Patient's name (first, last, and middle initial)
- Date of birth
- Sex
- Marital status
- Social Security number
- Patient address and telephone number
- Medicare number
- Diagnosis
- Physician (and address if not on staff)

Providing this information will avoid additional correspondence to your office at a later date. Please advise your patients, if we are billing them, that they will receive a bill for laboratory services from Saint Francis Medical Center. Visa® and MasterCard® are acceptable forms of payment.

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.

Courier Service—Outreach

Courier service is available for transporting specimens to Saint Francis Medical Center and for report and for delivering supplies. Pick-up frequency is determined by referral volume. Our administrative personnel will discuss relevant criteria with you.

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 and, where multiple codes are listed, you should select codes for tests actually performed on your specimen. **SAINT FRANCIS MEDICAL CENTER 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; and if you have any questions regarding use of a code, please contact your local Medicare carrier.

Infectious Material Submitted from Outside the Medical Center

The Centers for Disease Control and Prevention (CDC) in its regulations of July 21, 1980, has listed organisms/diseases for which special packaging and labeling must be applied. Required special containers and labels can be obtained from us by using the supply order form.

Federal regulations require that any organism referred for identification be labeled as an "Etiologic Agent" and be sent on an agar slant in a special transport container. Culture plates are illegal. A copy of the regulation is available from: Office of Biosafety, CDC, 1600 Clifton Road Northeast, Atlanta, Georgia 30333.

Informed Consent Certification

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

Patient Identification Accuracy

Saint Francis Medical Center must adhere to proper identification of patient specimens for good patient care, for both quality and safety reasons. The need for proper identification is specified by the College of American Pathologists (CAP) Laboratory General Checklist Commentary GEN 40700: “Specimens lacking proper identification or an accompanying requisition should not be accepted by the laboratory.”

To be compliant, it is important that each specimen be properly labeled with two patient identifiers (name and date of birth) with the same demographics that appear on the paperwork. If a discrepancy has been identified upon specimen arrival at Saint Francis Medical Center, we will contact you to make you aware of the discrepancy and cancel the test order. If you request to have the specimen returned, you will be responsible for shipping charges.

Reference Values

All reference values listed are for adults unless otherwise indicated.

Referral Tests

Some procedures are sent to reference laboratories for performance. These are generally tests that are requested too seldom to make it economically feasible to perform on-site. Many of these tests are listed in our catalog. Availability and turnaround time of tests not listed are available upon request.

Repeat or Additional Testing

Whenever possible, any portion of a serum specimen not utilized in initial testing is stored under refrigeration. Storage time is determined by the stability of the specimen. If additional or repeat testing is needed, call the laboratory as soon as possible to determine availability of the original specimen.

When a result is inconsistent with clinical findings, the physician may have the assay repeated at no additional charge. If original specimen is not available, a new specimen can be submitted with a completed test requisition indicating that repeat testing is requested.

Supplies

Specimen vials, special specimen collection containers and kits, sterile vials, stool containers, and request forms are provided without charge. In order to comply with applicable laws, supplies provided by our laboratory are to be used only for collection and preparation of specimens being sent to our laboratory for testing.

Test Ordering Guidelines

Upon ordering a laboratory procedure through the computer order-entry system, the user must select appropriate priority. This priority serves to instruct laboratory personnel how and when to process a specimen. Available priorities are itemized and defined as follows:

- ***A.M. Draw***: Morning collection rounds take place between 5 a.m. and 7 a.m. each day. Routine, daily laboratory tests should be ordered with “Routine” priority. The vast majority of laboratory tests should fall into this category.
- ***Urgent***: Tests ordered with this priority will be collected within 1 hour and performed as soon as personnel and equipment become available. This priority is intended for those tests which are not critical (STAT), but results are needed within 2 to 3 hours.
- ***Routine***: This priority is utilized for specimens which are collected by Nursing personnel. Tests which are not of a critical nature would fall into this category.
- ***STAT Testing***: This priority is intended for those patients who are in a critical and/or life-threatening situation. Tests ordered STAT will be collected and performed immediately. Results should be available within accepted turnaround time.

Note: All other work is interrupted while laboratory personnel are processing STAT orders; therefore, this priority should only be used for true emergencies.

- ***Timed Study***: This priority enables the user to specify date and time for specimen collection. Test will be performed as soon as specimen arrives in laboratory. Please remember that collection of timed tests is usually a batched process; therefore, it is not feasible for the

phlebotomist to deliver each individual specimen to the laboratory as it is collected, nor is it feasible to phone all timed results as soon as they are generated.

Test Turnaround Time

This catalog lists days on which the test is set up as a guide to expected turnaround times. Repeated tests take additional time.

Unacceptable Specimens

Some specimens cannot be analyzed because of improper collection or degradation in transit. Other specimens may have prolonged turnaround times because of lack of necessary ancillary specimens or patient information.

You will be notified of rejected or problem specimens upon receipt. To avoid specimen rejection, please use the following checklist.

Are the following conditions correct? Please check test catalog.

- Patient/specimen properly identified
- Full 24 hours for timed urine collection
- Lack of hemolysis
- Patient information requested
- Correct temperature (ambient, refrigerate, or frozen)
- pH of 24-hour urine
- Specimen container (sterile, separation gel, etc.)
- Specimen type (serum, whole blood, plasma, etc.)
- Specimen volume
- Transport medium