			Policy No.:
	HAWAII HEALTH SYSTEMS C O R P O R A T I O N "Touching Lives Everyday"	Quality Through Compliance	FIN 0503
			Revision No.:
			N/A
	Policies and Procedures	Issued by:	Effective Date:
		Corporate Compliance Committee	September 15, 2000
Subject:		Approved by:	Supersedes Policy:
Laboratory Stat Fees and Call			N/A
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- I. PURPOSE: Carriers and Fiscal Intermediaries will not make payment for stat fees or call back charges for diagnostic tests performed on a priority basis, nor for cost reporting purposes. The priority of these test requests does not represent a direct patient care service. Rather, the associated costs represent the priorities of the departmental workload.
- **II. POLICY:** Stat and call back fees must not be billed to Medicare, Medicaid, or other federally funded programs. The Chief Financial Officer at each facility will determine if stat and call back fees will be billed to non-federally funded payors.
- III. PROCEDURE: The Chief Financial Officer must determine if stat and call back fees will be billed to non-federally funded payors. If it is determined that stat and call back fees will not be billed to non-federally funded programs, such fees should be eliminated from the chargemaster. If it is determined that stat and call back fees will be billed to non-federally funded programs, perform the following to make sure these fees are not billed to federally funded payors. It is the responsibility of the Chief Financial Officer at each facility to ensure adherence to these procedures.

A. Implementation:

 Laboratory personnel must revise the chargemaster and related laboratory and order entry masterfiles/dictionaries to make sure charges associated with stat and call back fees reflect CPT/HCPC code "99999."

(<u>Note</u>: By using CPT/HCPC 99999 for stat/call back fees, edits may be established in the electronic processing vendor which prohibit federally funded payors from being billed for these fees. However, 99999 may not be recognized as a valid CPT/HCPC code by some payors. Therefore, charges to non-federally funded payors may need to be modified prior to submission.)

- 2. Edits (errors or translations) in the electronic billing system which prevent billing stat and call back fees to federally funded programs will be established and implemented.
- 3. All staff physicians responsible for ordering, charging, or billing laboratory services will be educated on the contents of this policy.

4. Mechanisms must be established and implemented for business office personnel to identify intermediary interpretations which vary from the interpretations in this policy. Specific intermediary documentation related to the variance(s) must be obtained and faxed to the Regional Compliance Officer who would report to the Corporate Compliance Officer.

B. Daily:

Business office personnel must review electronic billing edit/error reports daily and perform the following:

- Eliminate stat fees and call back charges for all federally funded payors identified by using CPT/HCPC 99999. If you are able to perform an automatic translation in the electronic billing vendor system to eliminate billing for these services to federally funded payors, go to step 3.
- 2. Modify the number of units and the related charges in the electronic billing vendor system to reflect the appropriate charge for federally funded claims.
- 3. Modify the number of units and the related charges in the accounts receivable system to match the corrected claim in the electronic billing system. This will help to ensure accurate patient statements and billings to secondary payors.