

# Oregon State Public Health Laboratory (OSPHL) Billing Changes

## Frequently Asked Questions

Created 11-28-14; Updated 12-3-14

**Note:** This document is intended as a *supplement* to primary training materials. For complete information about these changes, please also review the training materials posted at [www.healthoregon.org/phlbilling](http://www.healthoregon.org/phlbilling).

### **Test Request Forms**

#### **1. What forms are acceptable for ordering laboratory tests?**

- Starting December 1, 2014, discontinue use of the Region X IPP form (Form 8351).
- Most tests should be submitted using the Microbiology (Form 60) or Virology/Immunology (Form 42) Test Request Forms. Both the 2012 and 2014 versions are acceptable. Please order these forms from the OSPHL.
- Counties funded by the State HIV Program may continue to use the HIV CTS Test Request Form (Form 44). The 2012 version is the most updated.

#### **2. If I send a Region X IPP Form, what will happen to the test?**

- The OSPHL will test the specimen if it meets the OSPHL criteria for acceptable specimens.
- If a Medicaid number is provided, we will call you to obtain the name of the CCO for the patient.
- If you consistently continue to send Region X IPP forms, we will call to remind you to use the Virology/Immunology forms.

#### **3. Do I need to include the patient's address on the Test Request Form?**

- The patient's address is required for patients using *private* insurance coverage.
- If Oregon Medicaid is being used, or if no insurance information is provided, patient address is not required.
- However, providing the patient address greatly supports the public health system and related programs.

#### **4. How do I order Test Request Forms?**

- Please complete the OSPHL Stockroom Order Request Form located here: <http://public.health.oregon.gov/LaboratoryServices/CommunicableDiseaseTesting/forms/Pages/index.aspx>.

## **Insurance Information on Test Request Forms**

### *Providing Insurance Information*

#### **5. Do I have to provide insurance information if it is available in my clinic?**

- If the patient is using Oregon Medicaid, including a CCO, providing the payer information is required.
  - o The reason it is required is that only the OSPHL may bill Oregon Medicaid for the testing performed at the OSPHL. (OAR 410-130-0680)
- Insurance information for privately insured patients is optional.

#### **6. How do I tell you that a client has OHP Open Card, or which CCO the client is enrolled with?**

- Simply telling us on the test request form that a patient has “OHP” is not enough information for us to bill for a test. We will call you for additional information.
- Please provide the CCO Name, or write OHP Open Card, as applicable for the patient’s coverage. This information is provided in the Insurance or Health Plan Name box on the Test Request Form, or attached as noted in question number seven.

#### **7. Can I attach the patient’s insurance information to the OSPHL Test Request Form as a print-out from my electronic health record or a copy of the insurance card?**

- Yes. If these are attached, each must be highlighted on the attachment.
  - o The information that may be attached includes: Insurance or health plan name, the Policy Number or Member ID Number, Group Number (if applicable), and ICD-9 or diagnosis code for the test.
- All other patient information must be provided on the Test Request Form.

#### **8. Do we need to provide insurance information for specimens submitted for outbreaks or studies?**

- Yes. Please provide insurance or payer information if it is available for these specimens.

#### **9. Will my county or location be charged for outbreak testing if no insurance information is available?**

- No. If an Outbreak Number is included on the test request form, we will continue to charge other fund sources for this testing. We will not bill these to the county or location.

#### **10. How do I make sure that I am not charged for Chlamydia/gonorrhea tests that should be charged to the STD Program (formerly IPP)?**

- If a patient meets the STD Program’s testing criteria, please write “STD Program” or “IPP” in the Insurance or Health Plan Name box on the Test Request Form. We will charge the cost of the testing to the State STD Program grant.
- If you do not provide this, your organization will be billed.

**11. If a patient is using CCare coverage, do I need to include the CCare ID number?**

- No. You may provide the CCare number for your tracking, but it is not necessary for the OSPHL to receive the CCare ID number at this time.

**12. If I do not have insurance information and my organization agrees to pay for the laboratory testing, how do I communicate that on the form?**

- You may simply write “none” or “no insurance” in the Insurance or Health Plan Name box on the Test Request Form. If other funding is not available for that test, your organization will be billed.

*Diagnosis/ICD-9 Codes*

**13. If the client does not have insurance coverage, do we need to provide a diagnosis/ICD-9 code?**

- No. A diagnosis code is not required if private insurance or Medicaid will not be billed.

**14. May I include more than one diagnosis or ICD-9 code on a Test Request Form?**

- Yes. Include multiple ICD-9 codes when you have them. Especially consider providing more than one if you are ordering multiple tests using that test request form.

**15. Will the OSPHL provide a list of appropriate ICD-9 codes for the tests performed?**

- No. We do not have this level of detail available to us at this time. As we continue to learn more about this process, it may be possible to develop this resource.

**Billing and Invoicing Questions**

**16. Who do I call with questions about my invoice?**

- Please call the OSPHL’s billing vendor, Public Consulting Group (PCG) with questions about your invoice. The phone number will be on your invoice.

**17. Are you able to bill Medicare plans?**

- Yes. The OSPHL is enrolled as Medicare provider.

**18. Will PCG be sending invoices or bills to patients?**

- No. PCG will not send invoices or bills to patients. They will send invoices and claims to submitters and payers only.

**19. If I have corrected billing or payer information to provide, how do I provide this information?**

- If you need to provide updated payer information for a test listed on your invoice, please call PCG. The phone number will be on your invoice.

**20. How will CCare charges be managed?**

- There are no changes to CCare charges at this time.
- Charges for testing performed for CCare patients will be billed to the submitter. The submitter may request reimbursement from the CCare Program using the Clinic Visit Record (CVR).

**21. How will HIV tests be billed?**

22. HIV tests may be ordered using one of two Test Request Forms.

- o HIV tests submitted using the Virology/Immunology Test Request Form will be billed to the patient's insurance, if available. If insurance is not available, the submitting organization will be charged.
- o For counties funded by the HIV Program, or for any tests for which the HIV Program will be billed, continue to use the yellow HIV Test Request Form as appropriate. HIV tests submitted using this form will continue to be charged to the HIV Program and not to the submitter.

**Other Questions**

**23. Is the OSPHL in the process of interfacing with electronic health records (EHRs)?**

24. Currently, the OSPHL is completing IT projects which are foundational to interfacing with additional EHRs. We plan to work on additional electronic interfaces for laboratory orders and results in 2015.