

NOTICE TO PROVIDERS

Saint Luke's Regional Laboratories (SLRL) must comply with all guidelines set forth by the Federal Office of Inspector General (OIG), The Center for Medicare and Medicaid Services (CMS), and the Department of Health and Human Services (DHHS). These guidelines require the laboratory to provide annual written notification to providers outlining policies and procedures for the ordering and billing of tests for Medicare beneficiaries. Please review this information carefully and share it with your staff, particularly your laboratory and billing staff if applicable.

Medical Necessity

- Medicare will only pay for those tests it determines to be reasonable and necessary for the diagnosis or treatment of an illness or injury. Providers must provide ICD-10 codes or diagnoses with all outpatient laboratory requests to support medical necessity. Code the condition(s) to the highest degree of certainty specific to the encounter/visit for each test ordered.
- Medicare does not pay for routine screening tests with the exception of those tests listed at www.medicare.gov/coverage/preventive-and-screening-services.html
- Medicare will only pay for Organ and Disease Oriented Panels if all tests in the panel are reasonable and necessary.
- Some tests are limited by frequency and are covered by Medicare based on the frequency limits set.

Advanced Beneficiary Notice (ABN)

An ABN should be used when tests are ordered with a diagnosis code that does not meet medical necessity guidelines as set by the state (Local Coverage Determination) or federal (National Coverage Determination) policy and/or when the test has a frequency limit.

Medicare National and Local Coverage Determinations

The Medicare Program publishes National Coverage Determinations (NCDs) and local Medicare contractors publish Local Coverage Determinations (LCDs) for certain tests. These policies identify the conditions or other circumstances, including diagnosis codes, for which the included tests are or are not covered or reimbursed by Medicare. Further information can be found at the following websites : NCD: [MCD Search Results \(cms.gov\)](http://MCD Search Results (cms.gov)) LCD: [MCD Search Results \(cms.gov\)](http://MCD Search Results (cms.gov))

Organ and Disease Oriented Panels

- SLRL offers only Medicare defined panels and does not offer custom panels.
- Medicare will only pay for these panels if all tests in the panel are reasonable and medically necessary; multiple ICD codes should be considered when ordering panels.
- Do not order two or more panel tests that include any of the same components from the same patient collection. Instead, order the panel that incorporates the greater number of tests and order the remaining tests individually.

Panel	Components
Basic Metabolic Panel	Glucose, BUN, Creatinine, Sodium, Potassium, Chloride, CO ₂ , Calcium
Basic Metabolic Panel (calcium, ionized)	Glucose, BUN, Creatinine, Sodium, Potassium, Chloride, CO ₂ , Calcium (ionized)
Comprehensive Metabolic Panel	Glucose, BUN, Creatinine, Sodium, Potassium, Chloride, CO ₂ , Calcium, Total Bilirubin, Total Protein, Albumin, ALT, AST, Alkaline Phosphatase
Electrolyte Panel	Sodium, Potassium, Chloride, CO ₂
Renal Function Panel	Albumin, Glucose, BUN, Creatinine, Sodium, Potassium, Chloride, CO ₂ , Calcium, Phosphorous
Hepatic Function Panel (Liver)	Albumin, Bilirubin Total & Direct, Alkaline Phosphatase, ALT, AST, Total Protein
Hepatitis Panel (Acute)	Hepatitis A Aby (IgM), Hepatitis B Core Aby (IgM), Hepatitis B Surface Antigen, Hepatitis C Aby
Lipid Panel	Cholesterol, HDL, LDL(calc), Triglycerides, Chol/HDL Ratio, Non HDL Chol

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