

# Laboratory

Physician's (MD, DO, ND or DPMs) may perform themselves or employ a lab tech that is able to perform routine testing in the office. Many send part or all of their laboratory work to a hospital or independent laboratory.

The provider actually performing the analysis of the specimen may bill for laboratory services. Laboratory services are reimbursed according to our medical policy and are paid based on a fee schedule.

The following billing activities are not allowed:

- Billing for services not rendered.
- Billing for services performed by another provider or laboratory.

## **Billing Guidelines for Laboratories**

Please include the following information on laboratory claims:

- Diagnosis
- Name of the referring physician
- Procedure codes and descriptions
- Place of service – defined as where the specimen was drawn or the patient originated service
- Use **Modifier -90** when sending laboratory specimens to reference laboratories
  - This service is not eligible for additional reimbursement

## **Services Not Covered**

- Handling
- Conveyance or stat fees

## **Non-Participating Laboratories**

Asuris members receive the highest level of benefits when they receive services from participating providers. Benefits are reduced when services are provided by a non-participating or non-network provider. If it is necessary to refer your patient to a non-participating or non-network provider, please communicate this to your patient to avoid subjecting him or her to unexpected bills.

Please use the [Provider Directories](#) feature on our *Provider Web Site*, [www.asuris.com/provider](http://www.asuris.com/provider), when referring your patient to another provider.

## **Pathology Services**

Pathology services are reimbursed using the standard fee schedule. Submit claims in the same manner as laboratory services above.

Additional information about submitting claims is available in the [Claims & Billing](#) section of our website.