

HMO Louisiana, Inc. uses a preferred lab program with multiple statewide and regional lab vendors. Laboratory services provided to HMO Louisiana, Blue Connect, Community Blue, Signature Blue and Bridge Blue members must be submitted to a preferred reference laboratory in the member's network when not performed in the provider's office. Physicians who do not adhere to these referral guidelines may be subject to penalties as described in their provider contracts.

Please refer to the preferred lab requirements listed below to ensure your patients receive the maximum benefits to which they are entitled. A list of HMO Louisiana preferred reference labs is included on the back of this guide.

### Lab Program Requirements

Laboratory services provided to HMO Louisiana members must be submitted to preferred reference labs, if not performed in your office. Physicians may perform a selection of lab tests in their Clinical Laboratory Improvement Amendments (CLIA)-certified offices, which may be covered under the member's office copayment. See the in-office lab list on the back of this guide. Preoperative lab services rendered before an inpatient stay or outpatient procedure may be performed by HMO Louisiana participating hospitals.

If you perform lab testing procedures in your office, we require that a copy of your CLIA certification be provided along with your Louisiana Standardized Credentialing Application when applying for credentialing or recredentialing with Blue Cross.

You may only bill for the lab services on the back of this reference guide that are covered under your CLIA certification and performed in your office.

### Working With Preferred Reference Labs

Contact preferred reference labs directly to obtain the necessary forms for submitting lab services for your HMO Louisiana patients.

Physicians who do not collect specimens in their offices must refer their HMO Louisiana patients to a preferred reference lab draw site. You may use our online provider directories available at [www.BCBSLA.com](http://www.BCBSLA.com) or the list on the back of this speed guide to locate preferred reference lab draw sites. No specimen collection billing would be appropriate in this situation.

### Handling Fee

To compensate physicians for their time and effort associated with handling lab tests sent to a preferred reference lab, physicians will be paid a handling fee per member/per visit for tests. To be paid the handling fee, you must bill CPT® code 36415 or 99000.

**Please note:** Physicians are not eligible to bill for the handling fee when they refer lab work to labs other than our preferred reference labs. Physicians will not be paid a handling fee in addition to their fee-for-service reimbursement for lab tests performed in their offices.

### Special Arrangements

Special arrangements for weekend or after-hour pickups may not be available at all preferred reference labs. Please contact the preferred reference labs directly to make special arrangements.

### Provider Inquiries and Satisfaction

Providers can access member's benefits, eligibility and allowable charges using our self-service tools: iLinkBlue ([www.BCBSLA.com/ilinkblue](http://www.BCBSLA.com/ilinkblue)), Interactive Voice Recognition (IVR) 1-800-922-8866 and HIPAA transactions.

Please let us know if any quality issues arise so we can work with the appropriate lab to improve service and ensure that you and your patients receive the service you expect and deserve.

### Ordering Physician Requirements

The ordering/referring provider NPI is required on all lab claims otherwise the claim will be returned requesting that the claim be refiled with the ordering provider's NPI number.

If you are CLIA-certified to provide lab services in your office and you are billing for these services, please include the ordering provider NPI information on the claim form.

Place the NPI in the indicated blocks of the claim forms:

- **CMS-1500:** Block 17B
- **UB-04:** Block 78
- **837P:** 2310A loop, using the NM1 segment and the qualifier of DN in the NM101element
- **837I:** 2310D loop, segment NM1 with the qualifier of DN in the NM101 element

For complete lab billing guidelines, refer to our *Professional Provider Office Manual* and our *HMO Louisiana, Inc. Provider Manual*; both are available online at [www.BCBSLA.com/providers](http://www.BCBSLA.com/providers) >Resources.

For information on preferred reference lab requirements for the Blue Connect, Community Blue and Signature Blue networks, please refer to the corresponding network speed guide available online at [www.BCBSLA.com/providers](http://www.BCBSLA.com/providers) >Resources.

## Preferred Reference Labs

We use a preferred reference lab program with multiple statewide and regional lab vendors. Lab services provided to HMO Louisiana members must be submitted to one of the following labs:

### Statewide Labs

• Clinical Pathology Labs	<a href="http://www.cpllabs.com">www.cpllabs.com</a>	1-800-633-4757
• Laboratory Corporation of America (LabCorp)	<a href="http://www.labcorp.com">www.labcorp.com</a>	1-800-621-8037
• Quest Diagnostics	<a href="http://www.questdiagnostics.com">www.questdiagnostics.com</a>	1-866-MYQUEST (1-866-697-8378)

### Regional Labs

#### Baton Rouge Region

- Woman’s Hospital Laboratory (225) 924-8278

#### New Orleans Region

- Physicians Group Laboratories LLC (985) 872-5572

**Please note:** This is the current list of preferred statewide and regional reference labs as of the date this guide was published. To view the most current list of preferred reference labs, visit our website at [www.BCBSLA.com/providers](http://www.BCBSLA.com/providers) >Find a Doctor or Drug and enter the member ID number or network; the city, parish or ZIP; then type lab for specialty or keyword; then click search.

### Place of Service Billing for Lab Services

The place of service (POS) code for all clinical and anatomical laboratory services should reflect the type of facility where the patient was located when the specimen was taken, regardless of whether a global, technical or professional component of the service is being billed. For example:

- If an independent laboratory bills for a lab sample where the sample was taken in its own laboratory, POS code “81” (reference lab) would be reported.
- If a provider/an independent laboratory bills for a test on a sample taken in an inpatient hospital setting, POS code “21” (inpatient hospital) would be reported.
- If a provider/an independent laboratory bills for a test on a sample taken in an outpatient hospital setting, POS code “22” (outpatient hospital) would be reported.
- If a provider/an independent laboratory bills for a test on a sample taken in a physician office setting, POS code “11” (office) would be reported.

### Out-of-state Labs

If you refer your patients to a reference lab that is not in Louisiana, the out-of-state reference laboratory must be a participating provider for the member’s plan in the state where the specimen is drawn in order for the member to receive the highest level of member benefits. Please note that if a physician uses an out-of-state lab that is not a Preferred Lab of HMO Louisiana, the physician may experience compensation penalties as outlined in the Physician Provider agreement.

If you are collecting the specimen and sending the specimen to an out-of-state reference lab, you need to ensure that the out-of-state reference lab you are using is participating in the member’s network.

### Pass-through Billing Not Permitted

Pass-through billing occurs when the ordering provider requests and bills for a lab service, but the lab service is not performed by the ordering provider or the CLIA-certified lab owned and operated by the ordering provider.

The expectation is that we will receive lab claims billed from:

- The performing provider at a CLIA-certified lab, owned and operated by the ordering physician, or
- The ordering provider who owns and operates a CLIA-certified lab, or
- An in-network reference lab.

HMO Louisiana does not permit pass-through billing. Only the performing provider should bill for these services. You may only bill for lab services that you perform in your office. Providers may bill for the following indirectly performed services:

- The service of the performing provider is performed at the place of service of the ordering provider and is billed by the ordering provider, or
- The service is provided by an employee of a physician or other professional provider (e.g. physician assistant, surgical assistant, advanced practice nurse, clinical nurse specialist, certified nurse midwife or registered nurse first assistant), who is under the direct supervision of the ordering provider and the service is billed by the ordering provider.

## HMO Louisiana In-office Lab List

HMO Louisiana physicians may perform the following selection of lab tests (CPT® codes shown) in their CLIA-certified offices, which may be covered under the member’s office copayment. See front for instructions for all other lab tests not listed here.

80305	81000	82044	82570	83013	84030	85007	85027	86403	87172	87276	87510	87880	88331	89190
80306	81001	82247	82947	83014	84112	85008	85032	86485	87177	87430	87590	88311	88332	89220
80307	81002	82270	82948	83026	84132	85013	85610	86490	87205	87480	87591	88312	88333	89230
80320	81003	82272	82951	83036	84437	85014	85651	86510	87210	87490	87660	88313	88334	
80321	81015	82274	82952	83037	84702	85018	85652	86580	87220	87491	87804	88314	88341	
80322	81025	82565	82962	83518	84830	85025	86308	86756	87275	87502	87807	88329	88342	