





## BILLING

Health Network Laboratories is a participating provider for an extensive number of third party insurers and will bill most insurance companies directly. However, in the event of non-covered patients or non-covered services, deductible or co-payment, patients may receive statements directly from HNL. We recommend that patients be notified of this at the time the laboratory studies are ordered.

Accurate and complete information is essential for directly billing the insurance carriers. In addition to patient information, insurance companies specify that for laboratory tests to be considered as covered services, they must be reasonable and necessary for diagnosis and treatment of illness or injury: Laboratory services that are performed as part of a routine examination, in the absence of symptoms or diagnosis, are usually not covered. When screening services are performed as part of a routine exam, they should be reported with the appropriate ICD-10 diagnosis code. Claims reported with only routine diagnosis codes (V70.0 - V70.9) may be denied as non-covered screening service. Patient information and medically necessary diagnoses must be included with the laboratory orders. Orders for Limited Coverage Tests on Medicare patients should include a signed HNL Advanced Beneficiary Notice. Please refer to HNL's Guide to HGSA Medicare Services for Limited Coverage Tests and approved ICD-10 codes.

Any requisition form that has less than the required information may result in statements being sent to the patient. Therefore, cooperation between the physician, office staff, and the laboratory will enable billing for services in a timely fashion and reduce patient inquiries to your office and the laboratory.

HNL will provide you with either a **Guide to HGSA Medicare Services Limited Coverage Policies** or a **Guide to Empire Medicare Services Limited Coverage** at your request. Please contact your sales representative or Customer Care at 1-877-402-4221 (toll free).

Patient billing issues should be referred to HNL's billing office at 484-425-5700.



## PARTICIPATING INSURANCES

The following is a list of Insurances/Administrators/Networks with which HNL is participating:

If an insurance is not listed below, please contact one of our billing representatives at 877-402-4221 (toll free) for verification of HNL participation or contact the insurance company directly.

Aetna (Some plans require PCP selection)	Highmark Blue Shield Plans
Aetna Better Health	Horizon/NJ Blue Shield Indemnity Plans
All Commercial/Indemnity Carriers	Humana Medicare PFFS Products
American Progressive	IHP-Integrated Health Plan
AmeriHealth Health Plans	Independence Blue Cross
AmeriHealth HMO (PCP must select HNL)	InterGroup
AmeriHealth Mercy	Keystone 65 ( <i>PCP must select HNL</i> )
AmeriHealth Northeast	Keystone Health Plan Central ( <i>LVPHO only</i> )
AmeriHealth Personal Choice	Keystone Health Plan East ( <i>PCP must select HNL</i> )
Beech Street	Keystone Point of Service ( <i>PCP must select HNL</i> )
Blue Choice	Magellan Behavioral Health Plan
Blue Cross of Northeastern PA	Medicare
Blue Ridge Health Network	MultiPlan
Capital Blue Cross/Capital Advantage Plans	National Preferred Provider Network (NPPN)
ChoicePlus	New Jersey Medical Assistance
Cigna EPO Plans	Pennsylvania Medical Assistance
Cigna HMO	Personal Choice
Cigna-International	Personal Choice 65
Cigna Indemnity Plans	PlanVista
Cigna PPO Health Plans	Premier Blue
Cigna-Worldwide	PHCS
Consolidated Health Plan	Prime Health Services
Core Source	Private Health Care Systems (PHCS)
Devon Health Services	Spectrum Administrators ( <i>with the exception of Eastern PA Health Network &lt;EPHN&gt;</i> )
EHP, Inc.	Three Rivers Provider Network (TRPN)
EHP Significa	TriCare
Evercare	UnitedHealthcare - Pennsylvania ONLY
Federal Black Lung	<ul style="list-style-type: none"> <li>• Choice / Choice Plus Plans</li> </ul>
Federal Employees Compensation Act	<ul style="list-style-type: none"> <li>• Navigate Plans</li> </ul>
Gateway (PCP must select HNL)	<ul style="list-style-type: none"> <li>• OneNet PPO</li> </ul>
Geisinger Health Plans	<ul style="list-style-type: none"> <li>• Railroad Medicare</li> </ul>
Great West Health Plans	Valley Preferred
HealthAmerica/Health Assurance	WellCare Medicare Advantage PFFS
Health Markets Care Assured	

**If your patient is uninsured, the maximum charge for pain management testing is \$80.00**