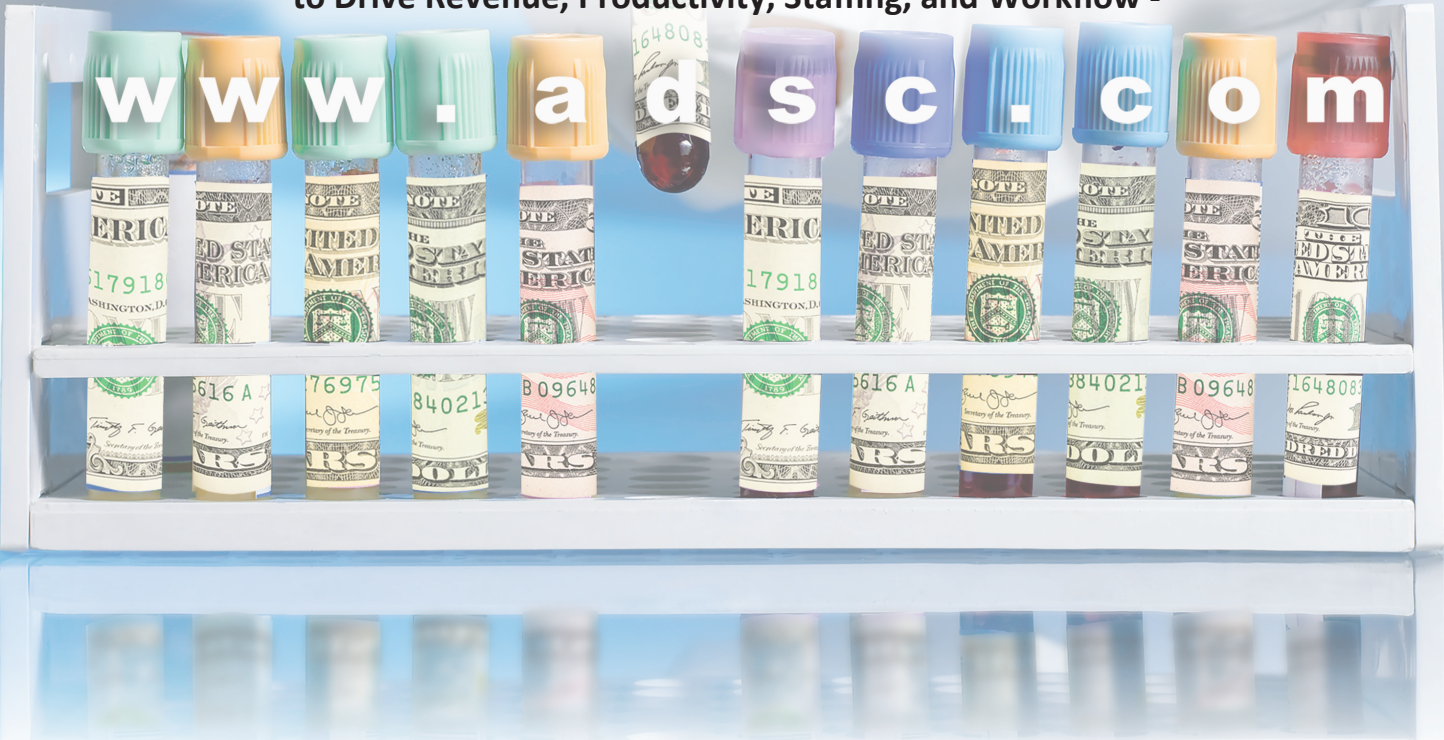


LAByrinth

Industry, Billing, and Operational News for Laboratories

- Presented by ADSRCM and our MedicsRCM Services for Laboratories
to Drive Revenue, Productivity, Staffing, and Workflow -



This Month's Message from Jim: Snowy with a Chance of NGS Testing

Snowy unless you're in Malibu, but in any case, there's still a chance of NGS testing, especially if yours is a genetic or molecular laboratory.

It seems as though suddenly, NGS testing has been hatched from out of nowhere. Well, it is relatively new with an [article the National Library of Medicine](#) from February, 2019 referring to it as a "new technology."

In any case, NGS testing has definitely taken its place center stage. Meeting with so many people at last month's AMP conference, it was almost nonstop NGS. You'd think it meant "next generation sequencing." (It does???)

Ok, just kidding there, but not kidding about NGS' quickly-emerging place in the world of genetic testing. If your laboratory is performing NGS testing, you'll want to ensure those claims are correctly created and submitted following all of the guidelines and nuances needed to ensure being paid on NGS-related claims.

Actually, that's true for all laboratory claims. You'll want to make certain they're submitted for maximized reimbursement, and not just for the sake of submitting them. You'll want to avoid denials proactively and have the tools needed to guarantee, as best as possible, that patients will pay their responsibility balances.



Jim O'Neill

Sales Manager, Laboratory Services

In short, you'll want to know that 2024 is as profitable a year as it can be for your laboratory. So, if you think 2023 could've or should've been better, you're probably right.

So please, call or email and I'll be happy to review how can help. We do guarantee that clients will see a revenue increase in 90 days. And our outsourced workforce will help consolidate your in-laboratory staffing issues.

And if you still prefer to use your own in-laboratory system, the same AI-driven platform we use (MedicsPremier from ADS) is available for that. It can be deployed in our cloud or on your local server.

Enjoy the holidays and all the best for a happy, healthy, safe, and profitable 2024!

Empire and Fidelis: What's in a Name?

What's in a name? Plenty if the names are Empire and Fidelis.

- ✓ All Fidelis Care QHPs will be known as Ambetter from Fidelis Care.

Fidelis Care's Medicaid Managed Care (MMC), Child Health Plus (CHP), Managed Long Term Care (MLTC), Health and Recovery Plan (HARP), and Essential Plan (EP) will continue under the Fidelis Care brand.

[Click here](#) for the Fidelis/Ambetter details.

- ✓ Empire BCBS will be changing to Anthem. There will be new Provider Services phone number (800-450-8753) and there are other changes to note.

[Click here](#) for the BCBS/Anthem details.

Both of these will take effect on January 1, 2024, so please read up on each assuming either or both have relevance to your laboratory.

(ADSRM is ready for the changes helping to take unnecessary pressure off our clients.)

Step Right Up and Get your Red Hot Electronic CLIA Certificates!



One might ask, "Why is this news?" It seems simple enough to warrant the question but the fact is, all CLIA laboratories that have received either paper or electronic CLIA certificates since 9/26/23 are now able to print their own CLIA certificates from the Quality Certification and Oversight Reports (QCOR) Clinical Laboratory Lookup Tool.

The link displayed with your laboratory will be the most recently issued CLIA certificate, but it may not show your laboratory's current information. One obvious example is when a laboratory's address has changed. The QCOR tool may show the current address while the certificate may reflect the old address. Any such new changes will be updated in the next issued certificate.

A Note on Fee Coupons: CMS has always sent three CLIA fee coupon notices prior to a laboratory's final payment date but as of 11/18/23, only two will be sent. So, if you're depending on that third reminder...

How you'll be Notified: CMS began sending electronic fee coupon notices on 11/22/23 to laboratories that

indicated on their CLIA application (Form CMS-116) their preference to receive email notifications. As with electronic CLIA certificates, laboratories will be emailed a link to their CLIA fee coupon; they can print a hard copy if not paying CLIA fees online. Laboratories that opted to receive email notifications may receive both paper and electronic fee coupon notices for a short time during this transition.

How you'll be Warned: CMS, on 11/22/23, began sending electronic warning notices regarding loss of accreditation to those laboratories that indicated on the aforementioned Form CMS-116 their preference to receive email notifications. These are sent when a Certificate of Accreditation laboratory loses its accreditation voluntarily or non-voluntarily. Notices includes information on steps the laboratory must take to continue to be certified by CLIA.

[Click here](#) for details from CMS.



A Patient's Challenge: Paying what they Owe

You probably know this already from your own real-world experience, but a recent survey of over 1,000 patients showed that fewer than one in three pay their medical bills in full when they're received, which means about 72% of patients are unable to either pay in-full, or not pay immediately, or not pay in full and not pay immediately.

The survey showed 7% intentionally wait until just before the due date to pay, and that 2% pay after the due date.

Unsurprisingly, affordability is the major reason for medical bills not being paid on time/in full.

Providing patients with multiple ways to pay and an ability to offer payment plans are critical. And, it makes sense that having a way to provide patients with a good estimate of what they'll owe after insurance pays goes a long way in keeping patient A/R under control. It also helps patients avoid surprises.

(ADSRM supports tools for estimating patient responsibility amounts, and for getting both eligibility verifications and out-of-network alerts prior to tests being performed.)

Need a New Year's Resolution? Think Taxonomy Codes for AmeriHealth

Did you say you have no resolutions to make for 2024?

If you submit claims to AmeriHealth, resolve now to get your taxonomy codes lined up for their 2024 claims. (Actually, our clients don't even have that resolution to make since we handle AmeriHealth taxonomy for them.) But for the purposes of the article:

Starting 1/1/24 correct taxonomy codes will be needed on AmeriHealth claims to ensure proper claims processing and payment. Claims submitted without the applicable NPI and correct correlating taxonomy codes will result in denials that must be corrected before AmeriHealth reimburses.

There are specific codes for different AmeriHealth claim types (electronic and paper...paper?).

[Click here](#) for the coding details (reminder that we'll handle this for you so that no details need to be read!)



Laboratory Fraud Story of the Month

This one comes out of FL where a clinical laboratory has agreed to pay almost \$1.2 million to resolve

False Claims Act allegations that its marketers paid illegal kickbacks to health care providers in violation of the Anti-Kickback Statute to induce the providers' laboratory testing referrals.

The laboratory has agreed to cooperate with the Department of Justice's investigations of, and litigation against, other participants in the alleged scheme.

The settlement resolves allegations that, despite knowing about kickbacks to health care providers and receiving those providers' subsequent patient referrals, the laboratory nevertheless submitted to Medicare the claims for laboratory testing ordered by those providers, in violation of the False Claims Act.

[Click here](#) for all of the details from the US Attorney's office.

Postage? What Postage

Mark your calendars for 1/21/24. It seems like a random, oddball date but that's when postage is due to increase by approximately 2%. And then it'll happen again in July. And then probably again in January, 2025 and then...

It won't be long before postage on a plain vanilla mail piece will be \$1.00.

You can take an active hand in avoiding postage altogether – at least as far as your patient statements are concerned – if you have:

- ✓ balance-due texting with a built-in payment mechanism enabling patients to pay directly through their texts, and/or
- ✓ emailable statements also with a built-in payment capability, and/or
- ✓ a patient portal that supports online payments directly through it

Any or all of these options will not only eliminate postage for statements, but also the need to print the statements themselves, the envelopes, the folding, stuffing, sealing, and physical mailing of them. PLUS, you're able to actually track your texts and emails, see if they've been received, opened, paid attention-to, or ignored. None of that is possible with regular mailed statements.

Of course you'll need some paper statements as a last-ditch backup for patients who don't text, have email, or access to a computer, or if texts/emails are returned as undeliverable. Those must revert automatically to paper and then ideally, to an offsite fulfilment resource that handles the grunt work which still helps your laboratory.

But overall, your number of patient statements and their collateral expenses (such as ever-increasing postage) and material should be dramatically reduced.

(ADSRM supports balance-due texting, emailable statements, and a patient portal, all as described. And as part of our service, patients are directed to call us - not you - if they have statement questions!)



All Part B Medicare Beneficiaries: Your New Deductible is Calling

Effective 1/1/24, the annual deductible for all Medicare Part B beneficiaries will be \$240, increasing by \$14 over 2023's annual deductible of \$226.

[Click here](#) for those details.

Healthcare Spending Growth Normalized

Other than “We Won the Lottery!!!,” those are the four words everyone in healthcare has been longing to hear.

But yes, according to HealthAffairs.org, healthcare spending grew 4.1% in 2022 which is faster than the 3.2% spending growth in 2021, although still notably slower than the rate of 10.6% in 2020. But, things are looking up.

The main bullets are:

- ✓ Health spending growth started to normalize last year when spending spiked as the federal government funneled funds into combating the pandemic.
- ✓ U.S. healthcare spending in 2022 hit \$4.5 trillion which was an all-time high according to new CMS data published in the Health Affairs report.
- ✓ While strong growth in Medicaid and private insurance spending last year was offset by declining federal spending as the pandemic eased, federal spending on public health has remained slightly elevated above pre-pandemic levels.

So, there's some reason to feel good. Win the lottery and you'll feel even better.

[Click here](#) for the article.



Next up: LAByrinth's first edition of 2024. Wishing you all the best for the holidays, happiness and health, and a prosperous 2024!

Contact us at [844-599-6881](tel:844-599-6881) or email rcminfo@adsc.com for more about our outsourced MedicsRCM services for your laboratory and our guarantee to increase your revenue in 90 days, or about the MedicsPremier platform implemented on your server or our cloud if an in-laboratory system is preferred.

Feedback or comments on our newsletters/content are greatly appreciated. Please opine by emailing marc.klar@adsc.com or by calling me at 973-931-7516. I would love to hear from you!

-Marc E. Klar, Vice President, Marketing, ADS RCM.

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