

Billing Information

Correlagen Diagnostics, Inc, offers four types of billing. Each billing procedure requires different types of information from our customers.

- [Direct Client Billing: Direct billing to Hospitals, Laboratories or Clinics](#)
- [Commercial Insurance](#)
- [Medicare/Medicaid/Medicare HMOs/Tricare/Champus/Financial Hardship](#)
- [Cancellation Policy](#)
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Direct Client Billing: Direct Billing to Hospitals, Laboratories or Clinics

For all hospitals, reference laboratories, and/or clinics, Correlagen recommends direct billing for all services performed (with the exception of certain Medicare or Medicaid testing). Direct billing simplifies the ordering process and can help avoid delay. To use this option, Correlagen requires a blanket Purchase Order (PO), an individual PO, or contact information for a person at your institution's accounts payable department whom Correlagen can invoice directly. Correlagen has also negotiated institutional contracts with several institutions. If your institution is interested in setting up a contract with Correlagen, please contact a Client Services Representative.

Commercial Insurance^{1,2}

Correlagen has established the Capped Patient-Payment Plan (CPPP) to assist patients covered by most commercial insurance (see below for exceptions). Normally, any charges not covered by the insurance company would be billed directly to the patient, and the patient would have to appeal any disputes about the amount covered directly to the insurance company. The CPPP limits the financial responsibility of the patient to 15% of the total cost plus any portion of the test cost that is applied by the insurance company to the patient's annual deductible. Please note that a higher CPPP rate applies for family testing.

Pre-qualifying Patients for the CPPP

Patients must be pre-qualified prior to testing to participate in the CPPP. To get pre-qualified, the ordering physician or patient will be required to submit the following to Correlagen prior to sending a sample:

- A fax of the front and back of the patient's insurance card
- The patient's date of birth
- The test (gene(s), syndrome) and test code(s) to be ordered

Correlagen will contact the patient's insurance carrier to determine whether the patient's plan covers the test and to check the patient's deductible. Correlagen will then inform the patient, or their representative, of CPPP eligibility and of the patient's financial responsibility based on plan coverage and any applicable deductible.

Participating in the CPPP

Patients choosing to participate in Correlagen's CPPP must submit complete insurance information in addition to a check or credit card authorization for payment with the testing order. Upon completion of testing, Correlagen will bill the patient's insurance company for the cost of testing. Correlagen will file all appropriate justifications and/or appeals on the patient's behalf to maximize the amount covered by insurance. Any reimbursement from or additional charges to the



patient will be settled after the claim status is determined by the insurance company. In the event that the amounts collected by Correlagen from the insurance company are less than 100% of the test price, the CPPP payment submitted by the patient will be applied towards the remaining charges. Any additional charges, such as amounts applied to the patient's annual deductible, will be billed to the credit card or, if a personal check was submitted, to the patient. In the event that the total amounts collected by Correlagen, from the patient and the insurance company, are greater than 100% of the test price, any excess amount will be refunded to the patient.

For Correlagen's reflexive testing, the CPPP co-pay for all tests selected must be provided with the testing order. Credit cards will only be charged as tests are performed. If a personal check was submitted, Correlagen will reimburse the patient for any tests not performed.

To ensure claims are submitted correctly and in a timely manner to the patient's insurance carrier, the following information has to be filled in completely and correctly on the requisition and payment forms included in the ordering package:

- Patient Name
- Patient Address
- Patient Date of Birth
- Subscriber's Name and Address (if different than patient)
- Claims Address
- Policy Number
- ICD-9 Code
- Requesting Physician
- Payment Information (Credit card number and expiration date or personal check)

If the patient does not choose to participate in Correlagen's CPPP, he or she will be responsible for any amounts not covered by his or her insurance up to the full cost of testing. The patient will also be responsible for appealing any disputes about the amount covered by the insurance company directly to the insurance company.

If the patient fraudulently represents insurance, patient responsibility will be 100% of the service price.

CPPP Exceptions

1) The CPPP is not available to patients whose insurance carriers historically have not reasonably reimbursed Correlagen for its services. Patients covered by these insurance carriers will be responsible for direct claim submission to their insurance carrier after testing is complete. Correlagen will inform patients of such exclusions prior to testing.

2) The CPPP is not available to patients covered by programs such as Medicare/Medicare HMOs, Medicaid, or Tricare/Champus, for which there is a specific government-mandated billing process.

**Commercial insurance does not include programs such as Medicare/Medicare HMOs, Medicaid, or Tricare/Champus, for which there is a specific government-mandated billing process.*

Financial Obligations of Patients Paying with Commercial Insurance

The financial obligations of the patient paying with commercial insurance may include:

- The CPPP co-pay (if eligible)
- If not eligible for the CPPP, any balance of the charges not covered by insurance
- Any applicable deductibles
- In the event that the insurance company remits payment to the patient, the insurance check(s) will need to be endorsed by the patient and forwarded to Correlagen



Medicare/Medicaid/Medicare HMOs/Tricare/Champus/Financial Hardship

Please contact a Client Services Representative to discuss Medicare, Medicaid and financial hardship cases.

Cancellation Policy

Requests to cancel test orders must be submitted in writing by the ordering physician. Cancellation requests will only be accepted if received before specimen testing begins.

Privacy Policy

Correlagen's privacy policy states that test results will be released only to the requesting physician/designee. Release of test results to anyone else (including insurance carriers) requires written permission from the patient.

The Health Insurance Portability and Accountability Act (HIPAA), enacted by the federal government in 1996, protects patients in group health insurance plans from discrimination based on genetic information. Most states have enacted laws providing additional protection of patients from discrimination based on genetic information.

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