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Des Moines Laboratory

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Annual Notice to Physicians-March 2024

In accordance with the recommendations of the Office of Inspector General (OIG), MercyOne Des Moines Laboratory provides the following information to educate providers on issues related to compliance, billing and coding practices of the clinical laboratory.

- Claims submitted for services will only be paid if the service is covered, reasonable and necessary for the patient, given his/her clinical condition.
- Federal law requires that the ordering physicians provide diagnostic information with every test requisition. Laboratory coverage and coding updates and the Medicare laboratory fee schedule may be found on the following websites:

https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx?inf_contact_key=39740a6d560fe854ff80b67db92310b5b06eff09c9c520b2a2ba2c4536867bf6

https://www.cms.gov/Medicare/Medicare.html?inf_contact_key=3f4037628725e937fae36d22801cc2c32120337ff41263fee1b33a075d0df4d3

- Medicare generally does not cover routine screening tests. Information on Medicare preventative services and frequency can be found at the following website: <https://www.cms.gov/Medicare/Prevention/PrevntionGenInfo/medicare-preventive-services/MPS-QuickReferenceChart-1.html>
- Medicare does not pay for tests classified by the performing laboratory as research use or investigational use only.
- Tests ordered that do not meet the requirements for coverage must be accompanied by an Advanced Beneficiary Notice.
- Medicare organ or disease related panels will only be paid by Medicare when all components of the panel are medically necessary.
- The ordering provider and/or facility must maintain in the facility's patient record, all required documentation to support the medical necessity of the services requested. A copy of the facility's medical record documentation may be requested in the event of a Medicare or compliance audit.

Thank you for choosing MercyOne Des Moines Laboratory.