

LEE PHYSICIAN HOSPITAL ORGANIZATION: QUICK REFERENCE GUIDE Updated: 1/1/2012

EFFECTIVE DATE	CONTRACTED PLAN	BENEFITS & CLAIM INFORMATION	CO-PAY/CO-INSURANCE	LAB SPECIFICATIONS	XRAY SPECIFICATION	CLAIMS PYMT/TIMELY FILING
1/1/2002	WEBTPA <i>TPA for Lee Memorial Health System Employees</i> (AKA LEE HEALTH PLAN)	Benefits/eligibility phone number: (888) 632-3235 Claims Mailing Address: P.O. Box 99906, Grapevine, TX 76099 payor ID 75261	Annual Deductible: \$350/\$1050 single/family Co-Pays: \$25 for Primary Care \$60 for Specialist Wellness Exam (Limit 1 per year for Employee and Spouse if covered by plan); No Co-pay	Labs - Lab work must be done at LMHS Labs. If lab work is drawn in physician's office, it must be sent to a LMHS Lab for testing. (Exceptions: Pap smears go to Ameripath, CVS testing and amnio-centesis chromosome studies go to Genzyme) The "Stat" lab codes on the attached list may be done in the physician's office if office has its own lab. <i>To establish lab pickup service call 424-3177.</i>	X-rays - plain xrays, sonograms, ultrasounds, echocardiograms, and dexascans can be done in the physician office and will be reimbursed if billed under the physician's tax id number. Plain x-rays have \$50 copay. PLEASE NOTE: MRIs, CTs, PET scans and Nuclear Studies must be done at LMHS.	Payment -30 working days from receipt of a clean claim. Filing – 90 days from Date of Service
1/1/1994	SENIOR CARE PLUS ▶ State Mutual Ins. Co ▶ American Pioneer ▶ Lincoln Heritage Life Insurance Company	Must accept assignment Refer to Patient Card	Medicare Supplement	Follow Medicare Guidelines	Follow Medicare Guidelines	Follow Medicare Guidelines
4/1/1994	MULTIPLAN, INC. National Multipayor Network	For benefits, eligibility and claims address, refer to Patients ID card Customer Service: (800) 546-3887	Refer to Patients ID card	Labs – In office if office has own lab facility, or Ameripath or LMHS Outpatient Labs , or Quest or LabCorp	X-rays done in the physician office will be reimbursed if billed under the physician's tax id number. Otherwise may be done at Lee Memorial Health System	Payment - 45 working days from receipt of a clean claim Filing – 90 days from Date of Service
11/1/1995 5/1/1998	BEECH STREET National Multipayor Network PPO AUTO MEDICAL PIP	For benefits, eligibility and claims address, refer to Patients ID card Customer Service: (800) 877-1444	Refer to Patients ID card	Labs – Ameripath or LMHS Outpatient Labs or Quest or LabCorp	X-rays done in the physician office will be reimbursed if billed under the physician's tax id number. Otherwise may be done at Lee Memorial Health System	Payment -30 working days from receipt of a clean claim. Filing – 60 days from Date of Service
7/1/1995	INTERPLAN HEALTH GROUP (IHG)/ACCOUNTABLE HEALTH PLAN National Multipayor Network	Refer to Patients ID card	Refer to Patients ID card	Labs - Quest or LabCorp	X-rays done in the physician office will be reimbursed if billed under the physician's tax id number. Otherwise may be done at Lee Memorial Health System	Payment - 45 days from receipt of a clean claim. Filing – NA

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5/1/1997	WELLCARE (STAYWELL) MEDICAID HMO STAYWELL HEALTHY KIDS	Refer to Patients ID card Refer to Patients ID card	Refer to Patients ID card Refer to Patients ID card	<u>Labs</u> – for pre-op only, may use LMHS Outpatient Labs or for all other Labs, Quest	<u>X-rays</u> done in the physician office will be reimbursed if billed under the physician's tax id number. Otherwise may be done at Lee Memorial Health System– Imaging requires prior Authorization from CareCore National LLC	Payment - 30 working days from receipt of a clean claim Filing – 60 days from Date of Service
1/15/2001	NPPN (National Preferred Provider Network) – PPO National Multipayor Network	Benefits/eligibility phone: Refer to Patient's ID card Customer Service: (800) 557-1656	Refer to Patient's ID card	<u>Labs</u> – In office if office has own lab facility, or Ameripath or LMHS Outpatient Labs or Quest or LabCorp	<u>X-rays</u> done in the physician office will be reimbursed if billed under the physician's tax id number. Otherwise may be done at Lee Memorial Health System	Payment - 30 days from receipt of a clean claim Filing – NA.
8/1/2001	AVMED – HMO &EPN Commercial HMO	Benefits/eligibility phone: (800) 257-2273	Refer to Patient's ID card	<u>Labs</u> – In office, per Avmed Lab Guidelines, or Quest (LMHS Outpatient Labs may be used for OP Pre-Surgical Labs)	<u>X-rays</u> done in the physician office will be reimbursed if billed under the physician's tax id number. Otherwise may be done at Lee Memorial Health System. See www.Avmed.org for list of complex diagnostic services not payable to PCP	Payment - 35 days from receipt of a clean claim Filing – 120 days from Date of Service
8/1/2006	COVENANT ADMINISTRATORS (formerly known as Self Insured Benefit Administrators or SIBA) TPA for Medical Anesthesia and Pain Management Consultants (MAPMC)	Benefits/eligibility phone:(800) 680-8728 Claims Mailing Address: 1745 N. Brown Rd. #400 Lawrenceville, GA 30043 Electronic payor ID 58102	MAPMC Annual deductible \$300/\$900 single/family. Co-pays \$15 for Office Visits, No Co-Pay for preventative visit	<u>Labs</u> – In office, if office has own lab facility, or Ameripath or LMHS Outpatient Labs or Quest	<u>X-rays</u> done in the physician office will be reimbursed if billed under the physician's tax id number. Otherwise may be done at Lee Memorial Health System.	Payment - 35 days from receipt of a clean claim. Filing - 90 days from Date of Service

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8/1/2009	FIRST SERVICE ADMINISTRATORS, INC. TPA for the following employer group: 1) Charlotte County Sheriff Office 2) District School Board of Collier County	Benefits/eligibility phone:(800) 226-3155 Claims Mailing Address:3035 Lakeland Hills Blvd, Lakeland FL 33805-2225 Electronic payor ID 59069	<u>Charlotte County Sheriff's Office</u> \$300/\$600 single/family; 15% co-insurance after deductible except well visit (copay \$15) <u>Collier County School Board</u> Varies depending on plan design chosen by patient	Labs – In office, if office has own lab facility, or Ameripath or LabCorp or LMHS Outpatient Labs	X-rays - Radiology done in the physician office will be reimbursed if billed under the physician's tax id number. Otherwise may be done at Lee Memorial Health System. CT scan/MRI/MRA/PET scan/Nuclear scan require preauthorization	Payment - 30 days from receipt of a clean claim. Filing – 1 year from Date of Service

**Workers' Compensation Panel*
Contracted Workers' Compensation Plans**

*Beech Street of Florida (Intracorp) @100% state wc rate
(or 85% of provider's U & C; whichever is less)*

Choice Medical Management @ 100% state wc fee schedule

Focus Healthcare Management @ 100% state wc fee schedule

Heritage Summit @ 100% state wc fee schedule

Marriott International, Inc. @ 100% state wc fee schedule

Metracomp @ lesser of 95% of billed charges, 100% state wc fee schedule, or 90% reasonable and customary

*** for those physicians on the work comp panel**

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FOR LMHS EMPLOYEES WITH WEBTPA, THESE "STAT" LABS MAY BE DONE IN THE PHYSICIAN'S OFFICE*

CPT	Description
36415	Collection of venous blood by venipuncture
36416	Venipuncture
80048	Basic metabolic panel
80051	Electrolyte panel (CO ₂ , Cl, K, Na)
80076	Hepatic function panel (7)
81000	Urinalysis, by dip stick or tablet reagent, non-automated with microscopy
81001	Urinalysis, by dip stick or table reagent, automated with microscopy
81002	Urinalysis, by dip stick or table reagent, non-automated without microscopy
81003	Urinalysis, by dip stick or tablet reagent, automated without microscopy
81005	Urinalysis, qualitative or semiquantitative, except immunoassays
81015	Urinalysis, microscopic only
81025	Urine pregnancy test, by visual color comparison methods
82150	Amylase
82247	Bilirubin; total
82270	Blood occult, by peroxidase activity (e.g. guaiac), qualitative; feces, 1-3 simultaneous determinations
82272	Blood occult, by peroxidase activity (e.g. guaiac), qualitative; feces, single specimen (e.g. from digital rectal exam)
82274	Immunochemical Fecal Occult Blood Test
82565	Creatinine; blood
82803	Gases, blood, any combination of pH, pCO ₂ , pO ₂ , CO ₂ , HCO ₃ (including calculated O ₂ saturation)
82946	Glucagon tolerance test
82947	Glucose, quantitative, blood (except reagent strip)
82948	Blood, reagent strip
82962	Glucose, chemstrip
83036	Hemoglobin; glycosylated (A1C)
83037	Hemoglobin; glycosylated (A1C)

CPT	Description
83986	Nitrazine
84703	Beta hCG, qualitative
85013	Spun microhematocrit
85014	Hematocrit (Hct)
85018	Hemoglobin (Hgb)
85025	Complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count
85060	Blood smear, peripheral, interpretation by physician with written report
85097	Bone marrow, smear interpretation
85610	Prothrombin time
85730	Thromboplastin, Partial, Time (PTT)
86308	Heterophile antibodies; screening
86580	Tuberculosis, intradermal
87210	Wet mount for infection agents (e.g., saline, India ink, KOH preps)
87220	Tissue examination by KOH slide of samples from skin, hair, or nails for fungi or ectoparasite ova or mites (e.g., scabies)
87400	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple step method; Influenza A or B, each
87420	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple step method; respiratory syncytial virus
87425	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple step method; rotavirus
87430	Infectious agent antigen detection by enzyme immunoassay technique, Streptococcus, Group A
87804	Infectious agent detection by immunoassay with direct optical observation; influenza
87880	Infectious agent detection by immunoassay with direct optical observation; Streptococcus, Group A
89051	Cell count, miscellaneous body fluids, except blood; with differential count
89060	Crystal identification by light microscopy with or without polarizing lens analysis, any body fluid (except urine)
89190	Nasal smear for eosinophils
89261	Semen analysis with washing
89300	Semen analysis; presence and/or motility of sperm including Huhner test

***ALL OTHER LAB WORK MUST GO TO A LMHS LAB (exceptions: Pap Smears go to Ameripath; CVS testing and amniocentesis chromosome studies go to Genzyme).**