

Lab Testing and What To Expect

At Riverbend Integrative Medicine, we encourage lab testing to ensure proper diagnosis and quality of care. The lab tests we recommend are comprehensive and offer a great deal of information regarding your current state of health and guide our practice to best serve you with individualized health care.

We use the following lab companies: Genova Diagnostics, Veridia Diagnostics, Meridian Valley, Igenix, Doctors Data and PAML. Each lab company offers a set of specific testing that complements our approach to functional medicine which is treating your whole health versus masking your symptoms.

Furthermore, we try to utilize any insurances we can. We understand wholeheartedly the stresses of high premiums and deductibles. Some of our lab companies unfortunately do not accept, nor bill insurances. They require payment on the requisition, at the time of the test submission. Our office will let you know before completing the test if one of your tests fall under these criteria. However, there are labs that will bill your insurance. For those companies, we have representatives to help assist with the billing process as the shared world between lab companies and insurance companies can be complicated at times. Having these representatives allows our office to be upfront with costs of labs, patient responsibilities, and give you the best estimation possible. With that said, below you will find the overview of Genova Diagnostics and Veridia Diagnostics billing programs that cater to our office and patient's needs.

Genova Diagnostics

Genova Diagnostics offers a variety of different tests, including our comprehensive nutritional test (NutrEval), our hormone tests (24-hour urine and hormone saliva), as well as a cortisol test.

Genova Diagnostics has an insurance billing program that allows patients to enjoy the benefits of their medical insurance services. Their program offers two options: Schedule A and Schedule B. Our office will help identify which option is best for you

Schedule A*

- All insurance providers** (including both HMO and PPO plans) with the exception of Medicare and the insurance providers listed under Schedule B below (Medicare patients [please see help page information](#))
Christian Healthcare Ministries

Schedule B

- Insurance providers listed below:

| | |
|--------------------------------|--------------------------|
| Aetna | Kaiser |
| Humana | Tufts |
| Principal | |
| Blue Cross Blue Shield (BCBS) | Federal Employee Program |
| Horizon Blue Cross Blue Shield | |

We will send you two yellow statements indicating the amount your insurance provider has assigned as patient responsibility

* Patients with high deductible plans with health reimbursement accounts (HRAs) should consider choosing the "No Insurance Billing, Prepayment Enclosed" billing option on the requisition and submit payment at the Schedule B amount to prevent substantial deductions from their HRA/HSA account.

** Please determine if your healthcare practitioner is an in-network provider. Members of the BCBS Federal Employee Program (FEP) with insurance plans in-network should use Schedule A. All other FEP members should use Schedule B.

Schedule A: This program includes insurance billing along with a flat rate payment of 'x' amount (depending on test). *Most of our patient's fall under this program.* Our office will let you know the flat rate fee. This fee needs to be sent in at the same time as your lab kit contents; failure to include payment may result in disqualification from the program. Once Genova Diagnostics bills your insurance, you will receive two **yellow** statements, 21 days apart. This indicates that

you are participating in their insurance billing program, and you are not required to pay this remaining amount.

Important Questions? & Answers

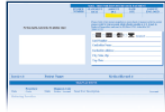
Under what circumstances will you receive a bill?

Yellow Statement



Reason:
Statement of copay/deductible/co-insurance, as assigned by your insurance carrier

Blue Statement



Reason:
The blue statement indicates that you are *not* participating in the program. Potential collections activity related to one or more of the following may occur:

- Your insurance provider paid you directly
- Missing information, or we are unable to file an insurance claim
- Failure to follow billing guidelines
- Failure to pay the required Schedule A or B deposit, thus disqualifying you from the program

After you have received both **yellow** statements, you may call Genova Billing Department and request a statement for a \$0 balance, giving you piece of mind that you indeed did not owe additional payment and will not be forwarded to credit reporting agencies.

At times you may be required to provide a copy of the EOB from your insurance provider to be eligible for this program. If this is the case, Genova will reach out to you personally both by phone and mail to let you know that they are in need of this. If you fail to do this, you will receive a **blue statement, that means eventually you will be forwarded to credit agencies. We strongly urge you to be mindful of any letters you receive from Genoa.*

The other time you may receive a **blue statement instead of a yellow is if you receive payment directly from your insurance provider. At that time, the payment and a copy of the EOB must be forwarded to Genova Diagnostics. If this is the case, please call Genova Diagnostics at: (800) 522.4762.*

Schedule B: If you are cash pay, or if you have one of the few insurances Genova does not bill, you will fall under Schedule B. You will fall under Schedule A which includes insurance billing along with your flat rate payment of 'x' amount (depending on test). Our office will let you know that flat rate fee. This fee needs to be sent in at the same time as your lab kit contents.

Veridia Diagnostics (or Singulex Diagnostics)

We use Veridia Diagnostics to run routine testing such as lipid panels, vitamin levels, cardiac markers, and much more. Veridia Diagnostics develops their own technology and is offering the world of lab testing great innovations. We utilize Veridia Diagnostics because of their incredible customer service and their cooperation to work with both patients with and without insurance coverage.

Multiple insurance companies, including Medicare and private healthcare companies, have established in-network coverage policies for the majority of Veridia testing. If you receive a bill from Veridia and are experiencing financial hardship, Veridia offers a Financial Assistance Program to help patients. They work within the realms of 'give what you can.' This is a huge benefit within the healthcare world that you don't experience often. Participation must be requested by you, the patient, and is subject to financial eligibility. If you have additional questions please call them any time at (800) 400-4344.

If you are uncomfortable or have reserved concerns, please contact the lab's billing department or your insurance company to confirm your patient responsibility.