Using Regional Pathology Services ABN (Medical Necessity Verification) Tool for Patients Covered by Medicare

www.reglab.org

1. Click on the ABN Tool icon found on the main page of Regional Pathology Services website.

2. Type the patient’s test(s) to be collected, use the “Enter” key to bring up the list of possible matches, then highlight and click on the appropriate test. Repeat this process to enter diagnosis code(s).
   - Search by “Mnemonic” if entering verbiage.
   - Search by “Code” if entering test code or ICD10.
3. The Test Code, Test Name, Diagnosis Code and Coverage will display. Coverage will say “not verified” until “Verify Coverage” is selected.

4. Once “Verify Coverage” is selected, the Coverage column will display “covered” or “not covered.” If “not covered” appears for a test, enter another diagnosis code and repeat the verification process.

5. The “View Policy Text” may be selected and will provide a list of covered diagnosis codes for the chosen test. If one of these codes applies to the patient, an ABN is not needed.
6. If the applicable diagnosis code does not cover the testing, the ABN needs to be printed and completed by the patient. Click on the ABN icon.

5. A new window opens. Enter the patient’s last name, first name and date of birth, then click “OK”.

6. The ABN form opens in a new window, automatically populated with the patient’s name, date of birth, test ordered, reason for denial and estimated cost. Print it by selecting the Print option near the bottom of the page. Explain to the patient which test(s) may not be covered by Medicare and they may need to pay for the test themselves. Have the patient select option 1, 2, or 3, sign and date the form. (If a patient selects option 3, DO NOT draw the test.) Send the ABN with the specimen and requisition; make a copy of the patient would like one for their records.