

## MEMORANDUM

TO:	All Regional Medical Laboratory (RML) Hospital Clients
FROM:	Jennifer Tune, MT (ASCP), MS HCA, Director of Ancillary Operations Trudie Thompson, Manager of Sales and Marketing Joshua Freitag, Manager of Revenue Cycle
DATE:	October 31, 2019
SUBJECT:	Payment for Technical Component (TC) Services for Commercial Insurance Plans

The Center for Medicare and Medicaid Services states in Chapter 12 section 60 of the Medicare Claims Processing Manual that all technical services furnished by independent laboratories to hospital inpatient, and outpatient cannot be billed by the independent laboratory. This rule was introduced in 2012 and is currently being followed for Medicare Part A/B/C patients.

As commercial insurance plans such as Aetna and HealthChoice begin to adopt this rule, Regional Medical Laboratory will be required to bill the technical component on any inpatient/outpatient pathology service to your client account following the guideline adopted by the commercial insurance plan..

Should you have any questions or need additional information, please contact your RML Account Representative.