

DEPARTMENT: Regulatory Compliance Support	POLICY DESCRIPTION: BILLING - Stat, Call Back, Stand-by and Handling Charges
PAGE: 1 of 2	REPLACES POLICY DATED: 4/6/98, 4/I/00, 10/1/01 (GOS.BILL.006); 3/6/06, 9/1/07, 5/15/10, 4/1/16, 5/1/18
EFFECTIVE DATE: February 1, 2025	REFERENCE NUMBER: REGS.BILL.006
APPROVED BY: Ethics and Compliance Policy Committee	

SCOPE: All HCA Healthcare affiliated hospitals performing and/or billing ancillary services. Specifically, the following departments:

Shared Services Centers Ancillary Departments Billing Integrity

Finance Administration Revenue Integrity

PURPOSE: To establish guidelines for billing stat, call back, stand-by and handling charges in accordance with Medicare, Medicaid and other federally-funded payer requirements.

POLICY: Stat, call back, stand-by and handling charges must <u>not</u> be billed to Medicare, Medicaid, or other federally-funded programs. The Chief Financial Officer (CFO) will determine if stat, call back, stand-by and handling charges will be billed to non-federally-funded payors.

PROCEDURE:

- 1. The facility CFO must determine if stat, call back, stand-by and handling charges will be billed to non-federally-funded payers.
 - a. If stat, call back, stand-by and handling charges **will not** be billed to any payer, the following steps must be performed:
 - i. Facility/SSC personnel must verify that no entries exist in the facility chargemaster for such services.
 - ii. On an annual basis, the facility/SSC personnel must review the chargemaster and related order entry masterfiles/dictionaries to verify that entries for stat, call back, stand-by and handling charges are not present.
 - b. If stat, call back, stand-by and handling charges will be billed to non-federally-funded payers specific codes must be assigned to these charges to identify them and prevent billing to federally funded payers. The applicable CPT/HCPCS codes that must be established in the facility chargemaster for stat, call back, stand-by and handling charges are outlined in the HCA Healthcare Laboratory Billing Compliance Plan. Please note that the CPT/HCPCS codes which are not specific to lab.
 - i. Review the Laboratory Compliance Plan and verify that the applicable CPT/HCPCS codes are assigned in the facility chargemaster.
 - ii. SSC personnel must have a process in place to remove stat, call back, stand by, and handling charges from claims for federally funded claims. These charges must be written off as non-covered/non-allowable and may not be claimed as Medicare Bad Debt expense.
 - iii. Compliance with this policy is monitored on a quarterly basis by Regulatory Compliance



DEPARTMENT: Regulatory Compliance Support	POLICY DESCRIPTION: BILLING - Stat, Call Back, Stand-by and Handling Charges
PAGE: 2 of 2	REPLACES POLICY DATED: 4/6/98, 4/I/00, 10/1/01 (GOS.BILL.006); 3/6/06, 9/1/07, 5/15/10, 4/1/16, 5/1/18
EFFECTIVE DATE: February 1, 2025	REFERENCE NUMBER: REGS.BILL.006
APPROVED BY: Ethics and Compliance Policy Committee	

Support to validate that stat, call back, stand-by and handling charges were not billed to federally funded programs. Any facility that falls out of compliance will be contacted by Regulatory Compliance Support.

2. Laboratory and/or hospital designated personnel responsible for ordering, performing, charging, coding or billing services must be educated on the contents of this policy.

DEFINITIONS (for purposes of this policy):

Ancillary Services: Hospital or other health care organization services other than room and board and professional services. Examples of ancillary services include diagnostic imaging, pharmacy, laboratory and therapy services.

Call Back charge: A charge for certain personnel returning to the hospital to perform tests or services.

Handling charge: A charge for the transfer of a specimen or device to or from an offsite location.

Stand-by charge: A charge for certain personnel being available at the facility should tests or services be needed.

Stat charge: A charge for tests or services performed on a priority basis.

REFERENCES:

- 1. Provider Reimbursement Manual Part 1 (Pub. 15-1), Chapter 21, Section 2102.1
- 2. Medicare Claims Processing Manual (100-4) Chapter 12, Section 30.6.15.3
- 3. Medicare Claims Processing Manual (100-4) Chapter 16, Section 60.1.2
- 4. HCA Healthcare Laboratory Billing Compliance Plan