Control Number: 81-52

Subject: Copayment for Laboratory and X-ray Services

References: Amended 1950 & 1974 Benefit Plans & Trusts, Article III, Sections A (3) (j) and A (8) (a)

Other: 1981 Contract Q&A #50

Question:

Are laboratory and x-ray services subject to copayment?

<u>Example 1</u>: An independent provider of laboratory and x-ray services is used by physicians. The provider bills the Plan on a fee-for-service basis. Are the provider's services subject to copayment?

<u>Example 2</u>: An outpatient department of a hospital bills the Plan for an emergency room visit. Although not indicated on the claim, the bill includes both hospital (emergency room) services and the attending physician's visit. The radiologist who takes and interprets x-rays ordered by the attending physician bills the Plan separately. Are the radiologist's services subject to copayment?

Answer:

No, the laboratory and x-ray services, including the diagnostic services of the clinical pathologists and radiologists, are not subject to copayment.

<u>Example 1</u>: The laboratory and x-ray services are not subject to copayment, but the visits to the physician who ordered the lab's services are subject to copayment.

<u>Example 2</u>: The emergency room visit is subject to copayment but the radiologist's services are not.