

Chapter 9 Billing Procedures and Payment

9.1. Procedures for Reimbursement

BCCHP will produce a monthly invoice based on information reported to us on the Examination & Reimbursement Forms. We use these data to generate billing reports that list the services provided for each client, by CPT code. To assure timely reimbursement, please submit accurate and complete forms as soon after the date of service as possible. Forms include: (1) Women's Health Examination and Reimbursement Form; (2) Radiology - Breast Evaluation Reporting Form; (3) Breast Diagnostic and Reimbursement Form; (4) Cervical Diagnostic and Reimbursement Form.

We will securely email billing reports to each contractor for review. Once reconciled, invoices are sent to Contractors for signature. Those can be signed and sent as a PDF back to BCCHP. Keep a copy of the invoice with the billing reports to match up to the check when it arrives, since King County check stubs will not provide backup detail listing the payment amount.

If you need to make billing corrections either call the Data Manager at (206) 263-8176 or fax a list of adjustments to (206) 296-0208. Include the client's name, date-of-service, CPT code(s), and reason for changes. We will review the information and account for any changes on the next invoice.

Depending on the contract, the invoice may include:

1. **Fee-For-Service Billing Reports** - The billing reports list the services provided for each client, by CPT code, as reported to BCCHP on the clinical forms. On the invoice, you will see the total for "Clinical Services (fee-for-service)" under the "Current Expense" column.
2. **Outreach and Recruitment** - Subcontractors providing these services must turn in the Outreach Monthly Activity Report to receive reimbursement. On the invoice, you will see the total for "Public Education/Outreach" in the "Current Expense" column. We base the amount on the outreach reimbursement rate included in your contract Scope of Work (SOW). The fields in your outreach form will generate the reimbursement amount for each month, not to exceed a maximum yearly outreach funding ceiling.

9.2 Breast and Cervical Health Fee Schedule

Go to the addendum for current fee schedule