

TO: ATLANTIC IMAGING GROUP MEMBERS

**FROM: JUDI ELAM
VICE PRESIDENT OF CLAIMS**

DATE: MONDAY, APRIL 30, 2001

RE: ADMINISTRATIVE FEE UPDATE

Please be advised that in the event you receive an Explanation of Benefits from Atlantic Imaging Group, LLC (ATLANTIC) whereby the Carrier denied payment for a Diagnostic Radiology Service, and ATLANTIC has pre-funded your claim, you should bill the patient the total PPO fee charged to the carrier which is found on the EOB.

As an example, a facility performing a MRI would be billed at the PPO rate of \$550.00 in the event that the patients were in SIU or coverage payment was denied due to benefits being exhausted. ATLANTIC would have pre-funded the claim at \$425.00. In the event the Carrier denied the claim, ATLANTIC would reconcile the pre-funded payment by withholding \$550.00 from a future claim and would withhold its Administrative Fee of \$125.00.

In the above example, a facility should bill the patient the PPO rate of \$550.00, which consists of the \$425.00 negotiated ATLANTIC rate plus the \$125.00 Administrative Fee. A CAT scan should be billed at the ATLANTIC PPO rate found on your ATLANTIC EOB and again, the bill to the patient should always include the Administrative Fee.

If you have any questions regarding this Fax Broadcast, please feel free to call me at ATLANTIC at 973-451-9415.

Judi Elam
Vice President Claims
Atlantic Imaging Group, LLC