

Tricare

The Great Plains Laboratory is contracted with Tricare in every region of the United States. Most of our tests are covered by Tricare. Patients should include a front and back copy of their military ID and the member's social security number. The Great Plains Laboratory will no longer file for Tricare members for the following tests due to recent changes in reimbursement from Tricare: The Microbial Organic Acids Test, Porphyrins Profile, Kryptopyrrole Test, and the Comprehensive Fatty Acids Test. If Tricare members want these tests, they must be paid in full at the time of service.

Patient Deductibles: TRICARE Standard patients must meet their fiscal year deductible based on the sponsor's pay grade. TRICARE Prime patients do not have a deductible unless they choose the Point of Service (POS) option. POS allows a patient to see any certified TRICARE provider without coordinating an authorization or referral through their Primary Care Manager (PCM), but there are additional costs.

Standard Coverage Deductible:

Active Duty E-4 and below

Individual - \$50

Family - \$100

Retirees/Active Duty E-5 and above

Individual - \$150

Family - \$300

Prime Coverage POS Deductible:

Individual - \$300

Family - \$600

plus 50% cost share

Prime Regular:

No deductible

No cost share

Medicare

The Great Plains Laboratory is contracted with Medicare. Please see the Advanced Beneficiary Notice (ABN) for a list of non-covered tests. All patients who have Medicare must sign and return the ABN form with the specimen. This form is included in the test kits. We require a copy of the front and back of the patient's card to be sent with the test specimen. If the patient has chosen to enroll in a Medicare Advantage program, then the laboratory will need to receive a copy of the Medicare Advantage program card. The Medicare Advantage program card is not the same as a Medicare card. Please contact The Great Plains Laboratory billing/insurance department at 913-754-0459 with any questions concerning coverage.

All Other Carriers

The Great Plains Laboratory is considered "out of network" for all insurance carriers other than those listed above. The laboratory will file "out of network" insurance on behalf of the patient, provided that out-of-network prepayment on the price list accompanies the Test Requisition Form. Prepayment is not required for BCBS, Medicare/Medicare Advantage, or Tricare. PPO insurance policies will usually cover our services once the patient's deductible has been met. The patient will be responsible for any co-insurance, co-payments, and any services denied as "not medically necessary". However, some "out of network" insurance policies will pay in full for the test performed at The Great Plains Laboratory. The laboratory will require prepayment for all out-of-network claims even when insurance states that full reimbursement will be made. Should the insurance pay for more than the patient balance, a reimbursement check will automatically be mailed to the patient by the end of the following month.

Insurance Plans Not Filed

The Great Plains Laboratory cannot bill any Medicaid plans and most HMOs (with the exception of BCBS of Massachusetts, Harvard Pilgrim, and Tufts). Please call The Great Plains Laboratory billing department at 913-754-0459 to confirm if we can file for your HMO. If we are unable to bill your insurance company, payment in full is required at the time of service.