

Laboratory Service Agreement

_____ and Florida Laboratory Analysis LLC.

The above parties agree to the following terms and agreements for providing specialty laboratory services as part of the total health of residents at _____ (facility name).

1. Laboratory work will be collected as ordered by the attending physician Monday thru Friday at the determined scheduled times.
2. Laboratory specimen collection supplies shall be provided by Florida Laboratory Analysis.
3. Laboratory results will be faxed to the facility/provider.
4. Laboratory shall bill _____ (facility or resident) for laboratory procedures performed on patients at a rate of 100 % of Medicare allowable for Medicare Part A. Other billing: Medicare Part B, Medicaid, Private Insurance and private pay shall be the responsibility of the laboratory. (if applicable)
5. See attached documentation of licensure.

After Hours Collection of Samples

1. Any sample collected after 5pm Monday-Friday shall be picked up the following morning and processed with priority.
2. Saturday/Sunday Service is currently not available. Any patient sample needing a STAT collection over the weekend would be subject to a STAT fee of \$60 and will be taken to the nearest hospital.

Facility will provide the following:

1. Completed requisition to be filled out and placed in the laboratory book provided.
2. Necessary information for billing the residents insurance. (Include: Insurance policy, policy number, diagnosis code, and copy of doctors order.)
3. Notification to the attending physician of laboratory results and place reports of results in the patient's medical chart.

Duration of Agreement:

This agreement shall remain in full force for a period of twelve months from the date hereof and shall be automatically renewed. This agreement may be terminated in writing by either party upon the giving of thirty (30) day notice.

 Authorized Facility Signature

 Authorized Laboratory Signature

 Authorized Facility Printed Name

 Authorized Laboratory Printed Name

 Date

 Date