

Diagnosis Code Update Request Instructions for Laboratory Orders

Note: This process is approved for laboratory orders for all Corewell Health regions.

If a diagnosis code (DX) for laboratory orders needs to be updated after the order has been submitted or completed, please follow the steps below:

Step 1: Gather your documentation.

- Include 3 patient identifiers in your request:
 - o **Required:** Patient name and date of birth.
 - o **Optional (choose one):** Address, SSN, email, or phone number.
- Include supporting documentation:
 - o **For Corewell Health Epic Users** (Medical Group and Community Connect): The PB Team will review the patient's chart in Epic for documentation supporting the requested diagnosis change.
 - For Independent or Non-Corewell Health Providers, include the following:
 - A revised order with the updated diagnosis code clearly noted.
 - Clinical notes from the patient's chart that support the requested diagnosis code change.
 - Please highlight or detail the specific diagnosis change in the notes.
 - o If the supporting documentation is missing, the PB Team will contact the provider to request it.
 - Supporting documentation is not required if the DX issue was a lab error.

Step 2: Submit via Secure Email to the PB Denials and Variance Billing Team:

- pbdenialsandvariancebillingteam@corewellhealth.org
- Or you may fax: 616-643-9434
 - o Note: Faxes will be forwarded to the PB Team via email. Faxed requests will not receive confirmation of the update.

Step 3: Review and Confirmation

- Once received, all documents will be forwarded to Health Information Management (HIM) to be attached to the patient's chart.
- A confirmation email will be sent to the provider once the diagnosis code update is completed. A confirmation will only be sent for emailed requests.