**GENETIC TESTING PROVIDER RESPONSIBILITIES**

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*October 11, 2018*

The provider needs to do the following:

* Place pre-authorization (PA) order at the time of clinic visit (do not place Genetic Counselor Clinic (GCC) consult at this time; you will be asked to place a GCC consult by the NDV nurses after the PA is approved). **SAME AS SNP**
* Ensure that statement of medical necessity (MN) for testing is documented in dictation (**SAME AS SNP)** as well as which family members will be available for comparator samples.
* Set expectations for timeline with family: Provider should do these things during the appointment where obtaining this test is discussed.
  + Explain that the PA takes approximately one month **SAME AS SNP**
  + Explain that the NDV RN will call family to inform family with outcome of PA (approved / denied) **SAME AS SNP**
  + Explain that AFTER the PA is completed, the family will be scheduled to come in for appointment with GC clinic.   
    Explain that the reason for this GC appointment is to educate family on implications of results, get consents signed and obtain parental sample(s) and patient sample if no banked DNA.
  + Educate family on who will need to be at GCC appointment--parent(s), patient if no banked DNA. Patient should also attend if they are able to participate in their own care.
  + Explain that when the test is sent off to be completed (after all this GC clinic appointment takes place), results will take approx. 11 weeks’ time to come back
  + Explain that they may need another visit with GCC if results need additional explanation, otherwise expect a call from provider.
* Once PA outcome is complete, NDV RN will notify provider of PA results
  + If PA denied and:
    - If Medicaid, NDV RN will request provider to verify MN if they wish to use SCH funds to continue with testing.
    - If commercial insurance and appeal is possible, NDV RN will request provider to write Letter of MN. If that appeal is denied, then family can apply for financial assistance.
  + If PA approved or moving forward with testing based on MN, NDV RN will request that the provider place the GCC consult including a note with the following information: PA expiration (to be provided by the NDV RN to the provider if applicable) and who will need to be present at GCC appointment (parent(s) and/or patient). **THIS IS A NEW STEP**
* NDV RN will fill out lab requisition and route to provider for signature then forward to GC that will be seeing family in clinic. **PREVIOUSLY, PROVIDER ONLY SIGNED A PREAUTH ORDER AND A LAB ORDER; NOW ALSO SIGNING A CONSULT ORDER**
* Two days prior to GC appointment, the NDV RN will propose the order for the patient to the provider as an “add-on” order if banked DNA or “misc test” if blood draw needs to be completed. **SAME PROCESS AS SNP JUST A DIFFERENT TIMING**
* After GCC appointment, GC will have comparator samples collected and will enter orders for comparator samples. **THIS GETS THE NDV NURSES AND PROVIDERS OUT OF THE SAMPLE COLLECTION BUSINESS**
* **Test result follow up is the responsibility of the ordering provider**. A referral may be placed for post-test results review in the GCC after results are visible in CIS, if desired by the NDV provider.  
  In my mind, the results of these types of tests deserve a call from the ordering provider unless they are absolutely normal.   
  The NDV nurses cannot explain the subtle differences in the results of unknown clinical significance or answer all of the questions that patients may pose.