

Sioux Falls Service Center
 800 East 21 Street - PO Box 5045
 Sioux Falls SD 57117-5045
 605.322.7187 or 800.560.4846
 Fax 605.322.7183

**Mandatory Guarantor Information for Children Under 18 Years of Age
 When Avera McKennan is Requested to Complete Billing**

This does NOT apply to “account bill” requested testing.

Any time a minor (child under the age of 18) has testing requested through Avera McKennan Regional Laboratory and we are requested to bill for testing, it is MANDATORY that the ordering facility or physician provide complete guarantor information. The guarantor is the adult who is financially responsible for the health care of the minor child.

Testing will be delayed on minor children if correct and complete guarantor information is NOT provided. Testing will be held until the ordering facility and/or physician is contacted and has provided this information to our laboratory.

The following information MUST be obtained from the parent/guardian of a minor and filled in completely on our requisition:	
Minor Information	Parent/Guardian Information
1. first and last name	1. name
2. date of birth	2. address
3. gender	3. social security number
4. address, city, state, zip	4. insurance name/address
	5. subscriber name
	6. <u>subscriber date of birth</u> (new)
	7. policy numbers