



Cholesterol Testing

State(s):

☒ Idaho ☒ Montana ☒ Oregon ☒ Washington ☐ Other:

LOB(s):

☒ Commercial ☒ Medicare ☒ Medicaid ☐

Enterprise Policy

Clinical Guidelines are written when necessary to provide guidance to providers and members in order to outline and clarify coverage criteria in accordance with the terms of the Member's policy. This Clinical Guideline only applies to PacificSource Health Plans, PacificSource Community Health Plans, and PacificSource Community Solutions in Idaho, Montana, Oregon, and Washington. Because of the changing nature of medicine, this list is subject to revision and update without notice. This document is designed for informational purposes only and is not an authorization or contract. Coverage determination are made on a case-by-case basis and subject to the terms, conditions, limitations, and exclusions of the Member's policy. Member policies differ in benefits and to the extent a conflict exists between the Clinical Guideline and the Member's policy, the Member's policy language shall control. Clinical Guidelines do not constitute medical advice nor guarantee coverage

Background

Screening and diagnostic testing for cholesterol and certain other lipid disorders or cardiac risk factors is standard of care to detect certain blood lipid abnormalities (variously called dyslipidemia, hyperlipidemia, hyperlipoproteinemia, hyper-cholesterolemia, hypertriglyceridemia, or simply blood lipid disorders).

These abnormalities can increase the risk of atherogenesis (tendency to form plaque and occlude arteries), thus causing heart disease, cerebrovascular disease, or peripheral vascular disease.

The most familiar of the blood lipids are cholesterol and triglycerides, which are present in the blood in the form of complexes combined with certain proteins. Depending on the size and density of the complexes, they may be called chylomicrons, very low density lipoproteins (VLDL), intermediate density lipoproteins (IDL), low density lipoproteins (LDL), and high density lipoproteins (HDL). A "lipid profile" commonly reports levels of total cholesterol, LDL, HDL, and triglycerides. Fasting values are most reliable.

Associated cardiac risk factor screening is sometimes performed using markers that are sometimes associated with increased risk of coronary heart disease (CHD).

Other subclasses and fractions of these have been identified, some of which are felt to be atherogenic in their own right.

Criteria

Commercial

PacificSource considers the following tests medically necessary:

- Standard lipid profile testing (Total cholesterol, HDL-C, LDL-C, Triglycerides) for screening, diagnosis, and monitoring of therapy;
- Other tests or markers of cardiovascular risk when ordered as part of a cardiac or lipid profile (e.g. homocysteine*, lipoprotein (a)*, CRP*, high sensitivity CRP*, prothrombotic factors like fibrinogen*) only in the following situations:
 - Presence of two or more major risk factors in the face of otherwise optimally treated (including therapeutic lifestyle changes and medication) and near normal LDL-cholesterol;
 - Risk factors include: personal history of premature CHD/cardiovascular disease, family history of premature CHD in 1st degree relative; diabetes type I or II; current smoker; high blood pressure >140/90.
 - Premature cardiovascular disease may include documented coronary heart disease or myocardial infarction, peripheral arterial disease, abdominal aortic aneurysm, or carotid artery disease (>50% stenosis). Premature is defined as < age 55 for men and < age 65 for women.
- Apolipoprotein B testing for individuals currently on statin therapy when the results will be used to guide or modify medical management

Exclusion: PacificSource does not cover nonstandard cholesterol tests as part of cardiac risk screening or monitoring because they are considered investigational including but not limited to the following:

- LDL fractionation
- HDL fractionation,
- apolipoprotein B** (may be considered in certain high risk situations)
- lipoprotein (a) (may be considered when meeting the cardiac risk factors listed above)
- lipoprotein-associated phospholipase A2 (Lp-PLA2) [including the PLACTest (diaDexus Inc.)]
- long chain omega-3 fatty acids
- Apolipoprotein A-1
- Apolipoprotein E
- VLDL
- Insulin levels – investigational and/or not proven to be efficacious in the context of managing cardiovascular disease risk; not covered.
- Skin cholesterol testing using the PREVU Point of Care (POC) Skin Sterol test (PreMD Inc.)

* Standard clinical laboratories offer basic lipid profiles and will also typically offer CRP, lipoprotein (a), homocysteine, and fibrinogen. When reviewing claims or preauthorization requests for such lab tests, attention should be directed to the PacificSource definition of medically necessary, including that it be “the least costly of the alternative services or supplies that can be safely provided”. For the vast majority of the public, the latter four tests are not medically necessary on basis of the medical or the “least costly” criteria.

** Several of these tests are offered almost exclusively by certain labs (e.g. Berkeley Heart Labs) that hold patents on some of the tests and consequently charge very high rates for these profiles. Although

the “least costly of the alternative services” may not strictly apply to these proprietary, one-source tests, they should be denied as “investigational” at this point. Neither do they fit some of the key parameters for the contract definition of medically necessary.

Medicaid

PacificSource Medicaid does not follow this policy but follows the guidance of Oregon Administrative Rules (OAR) 410-120-1200 & 410-141-3820 to 3825, and Guideline Note 173 of the OHP Prioritized List of Health Services.

Medicare

PacificSource Medicare follows CMS Local Coverage Determination L34419, L33908, L34856 and National Coverage Determination 190.23 for coverage guidelines for cholesterol testing

Coding Information:

The following codes are covered when the above criteria are met:

80061 Lipid panel

82172+ Apolipoprotein

82465 Cholesterol, serum or whole blood, total

83090 Homocysteine

83718 Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)

83721 LDL cholesterol

84478 Triglycerides

85384 Fibrinogen; activity

85385 Fibrinogen; antigen

+ NOTE code is not specific - only Apolipoprotein B testing is covered

Not Covered (Investigational)

0111T Long-chain (C20-22) omega-3 fatty acids in red blood cell (RBC) membranes

83525* Insulin; total*

83695 Lipoprotein (a)**

83698 Lipoprotein-associated phospholipase A2 (Lp-PLA2)

83700 Lipoprotein-blood; electrophoretic separation and quantitation

83701 Lipoprotein, blood; electrophoretic separation and quantitation; high resolution fractionation and quantitation of lipoproteins including lipoprotein subclasses when performed (eg, electrophoresis, ultracentrifugation)

83704 Lipoprotein, blood; electrophoretic separation and quantitation; quantitation of lipoprotein particle numbers and lipoprotein particle subclasses (eg, by nuclear magnetic resonance spectroscopy)

83719 VLDL cholesterol

*Investigational only in the management of cardiovascular risk

** see cardiac risk factors listed above for lipoprotein (a)

References

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Appendix

Policy Number: [Policy Number]

Effective: 4/1/2020

Next review: 4/1/2021

Policy type: Enterprise