

MEDICARE – DENIAL OF LIPID TESTING DUE TO ANNUAL FREQUENCY LIMIT

Please note that Physicians Laboratory is undergoing an audit in which Medicare has selected several of our referring providers for a targeted review. Specifically, those transactions that are being audited include Lipid testing which falls under National Coverage Determination (NCD) 190.23 (<https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?NCIDid=102>). This NCD states the following:

When monitoring long term anti-lipid dietary or pharmacologic therapy and when following patients with borderline high total or LDL cholesterol levels, it may be reasonable to perform the lipid panel **annually**.

Any **one component** of the panel or a measured LDL may be reasonable and necessary up to six times the first year of monitoring dietary or pharmacologic therapy. More frequent total cholesterol, HDL cholesterol, LDL cholesterol, and triglyceride testing may be indicated for marked elevations or for changes to anti-lipid therapy due to inadequate initial patient response to dietary or pharmacologic therapy. The LDL cholesterol or total cholesterol may be measured three times yearly after treatment goals have been achieved. (NOTE: Only one test can be ordered more than once per year, and it must follow medical necessity guidelines. You cannot order all of the individual components of a Lipid Panel on the same date of service as the tests will be bundled and denied for frequency).

These individual test numbers are as follows:

128 Cholesterol
1528 LDL, Direct
734 HDL Cholesterol
170 Triglyceride

Please understand that Physicians Laboratory is not initiating these audits and we are required to participate in order to maintain our Medicare credentialing. Additionally, we have no influence over the NCDs/LCDs which are enforced by CMS. This is not unique to our facility and all laboratories are being scrutinized for frequency limit failures. We understand that there are instances in which physicians feel that Lipid testing is necessary more frequently than once per year and that non coverage of these services is frustrating. Moreover, the numerous requests sent to your offices for additional documentation to support medical necessity can also be time consuming and inconvenient. It is never our intention to dictate care or unnecessarily burden our clients with administrative tasks; however, we must comply with the published CMS guidelines and their audit requirements. Failure to do so will ultimately jeopardize our CLIA license, as well as our ability to operate as an independent laboratory.

As a provider, if you feel that it is medically necessary to test your patients more frequently than once per year, you can ask the patient to complete an ABN as a precautionary measure. This will allow us to bill the patient for testing if the test is not covered by Medicare. The other option would be to order only one component of the Lipid Panel (ex: Cholesterol, LDL, HDL, or Triglyceride) as detailed above. You can obtain a blank ABN on the CMS website at: <https://www.cms.gov/medicare/forms-notices/beneficiary-notices-initiative/ffs-abn>. This form is also available on our website (physlab.com) under Resources.

If you have any questions or comments regarding this bulletin, please do not hesitate to reach out to me directly via email kmoreland@physlab.com or by cell phone (402)677-8872. Physicians Laboratory truly values your business and I appreciate your patience and understanding as we all continue to navigate this difficult medical landscape which continues to be dominated by increasingly strict medical coverage policies and decreasing reimbursement.

Sincerely,
Kacey J. Moreland, M.B.A.
Director of Operations
Physicians Laboratory