Laboratory Testing MP9539

Covered Service: Yes, dependent on applicable laws and provisions per state

Prior Authorization Required: No

Additional Information: None

Prevea360 Health Plan Medical Policy:

Coverage Policy

1.0 Laboratory tests are **covered** when the individual test or panel:

- 1.1 Has been reviewed within The Health Plan's technology assessment process, is considered a covered service, and is published as a Health Plan policy; **OR**
- 1.2 Meets The Health Plan's definition of a standard laboratory test, as defined in the description section of this policy and is ordered and submitted from or under the direction of a physician.

2.0 Laboratory tests are **not covered** when the individual test or panel:

- 2.1 Has been reviewed within The Health Plan's technology assessment process, is considered experimental and investigational and therefore **not covered**, and is published as a Health Plan policy; **OR**
- 2.2 Meets The Health Plan's definition of a non-standard laboratory test, as defined in the description section of this policy. These tests are not medically necessary and therefore **not covered**; **OR**
- 2.3 Is self-referred/submitted by the member (e.g. not ordered and submitted from or under the direction of a physician).

3.0 The Health Plan defines a standard laboratory test or panel as:

- 3.1 A test/panel performed in a CLIA-certified clinical laboratory setting (e.g., hospital laboratories; physician offices; reference laboratories contracted with multiple inpatient/outpatient facilities or multiple physician clinics); **AND**
- 3.2 Recognized as clinically valid by at least **one** of the following professional organizations:
  - 3.2.1 American Society of Clinical Pathology (ASCP)
  - 3.2.2 Association for Molecular Pathology (AMP)
  - 3.2.3 Clinical and Laboratory Standards Institute (CLSI)
  - 3.2.4 College of American Pathologists (NCCLS)

3.2.5 National Committee for Clinical Laboratory Standards (NCCLS)

4.0 The Health Plan defines a non-standard laboratory test as:

4.1 Not meeting the criteria of a standard laboratory test defined above (3.0); **OR**

4.2 Possessing **one or more** of the following attributes:

4.2.1 A test proposed for the diagnosis and/or monitoring of a condition or disease state which is inconsistent with medical standards and accepted practice parameters of the community.

4.2.2 A test using a methodology other than that employed in standard medical practice (e.g., spectroscopy analysis instead of a standard culture for microorganisms).

4.2.3 A test using a specimen type other than that employed in standard medical practice (e.g., a saliva specimen instead of a standard blood collection).

4.2.4 Panels comprised of numerous analytes – a high number of which do not impact clinical utility to the diagnosis or management of the disease or condition under consideration. (e.g., a hormone panel measuring multiple analytes when two analytes are recognized as standard laboratory practice).

4.2.5 Test results reported in laboratory reporting values not recognized as national or international values employed in standard laboratory practice (e.g., low-medium-high versus micrograms/liter).

Coverage of any medical intervention discussed in a Prevea360 Health Plan medical policy is subject to the limitations and exclusions outlined in the member's benefit certificate or summary plan description (SPD) and to applicable state and/or federal laws.

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