

# Lab Billing Brief

## Navigating and Preventing Denials

*This bulletin aims to keep you informed and equipped with the latest information on medical necessity of the tests you order to ensure accurate and efficient billing practices.*

April 17, 2026

**Tests that contain CPT:  
80061**

**LAB18** Lipid Panel  
**LAB2111122** Lipid Panel,  
with reflex to LDL  
Cholesterol Direct if  
Triglycerides >800

**More Info Available:**  
[Medicare NCD](#)  
[BCBS Policy](#)

### Lipid Panel Testing

Corewell Health is seeing consistently high volume of denials from BCBS, Medicare and Medicare Advantage for 80061 Lipid Panel lab tests, due to lack of medical necessity and/or frequency.

### When Testing is Medically Supported

#### BCBS Frequency guidelines:

When individuals are 18 years or older, Lipid Panel testing is supported for CVD screening every 4 years, as well as annually for individuals at an increased risk for dyslipidemia.

#### Medicare/MA Frequency guidelines:

Lipid panel is reasonable annually, with individual components of the tests used more frequently while establishing treatment.

#### Commonly used diagnosis codes that meet medical necessity:

*(This list is not exhaustive.)*

- **E78.5:** Hyperlipidemia, unspecified
- **E78.2:** Mixed Hyperlipidemia
- **I10:** Essential (primary) hypertension
- **E78.00:** Pure hypercholesterolemia, unspecified
- **Z79.899:** Other long term (current) drug therapy
- **Z13.6** Encounter for screening for cardiovascular disorders
- **N18.1-N18.9** Chronic Kidney Disease Stg 1-5, End Stage Renal Disease
- **E09 – E13** Type 1 and Type 2 Diabetes w and w/o complications

### When Testing Is NOT Medically Supported

#### Commonly used diagnosis codes that do not support medical necessity:

*(This list is not exhaustive.)*

- **Z00.00:** Routine physical examination
- **Z13.1** Encounter for screening for diabetes mellitus
- **Z13.220** Encounter for screening for lipid disorders (this code is accepted by most commercial payors)