



## **Lab Panel Coding Policy**

### **Lab Panels**

Laboratory panels were developed for coding purposes only and are defined by AMS and published in the CPT Pathology and Laboratory section includes Organ or Disease Oriented Panels in the code range 80047 to 80081 and 80400 to 80439.

Each panel is defined by component lab tests. Proper coding requires the submission of a panel code when all the components are performed. For instance, CPT code 80061 is a Lipid Panel. Lipid panel is defined as CPT codes:

- 82465 (serum cholesterol)
- 83718 (HDL cholesterol)
- 84478 (triglycerides)

When these three lab tests are performed, the correct code to submit on a claim is 80061

### **Single Component Test**

A single component test can only be part of one lab panel code. If a group of tests overlaps two or more panels, report the panel that incorporates the greater number of tests and report the remaining tests using individual test codes.

### **General Health Panel**

CPT code 80050, is composed of metabolic panel, a complete blood count and a TSH level. Several different combinations of CPT codes can combine into 80050. This test is not covered by Medicare. When billing Medicare, the component tests must be billed individually.