

Revised: June 1998  
Approval: W.W.L.

## **Laboratory Services**

### **Benefit Coverage** (Cal. Code Regs., tit. 10, § 2699.6700, subd. (a)(4))

Appropriate examinations, tests, and other diagnostic interventions, for the prevention, diagnosis and treatment of illness or injury are covered. Some services will require prior authorization by the IPA.

### **Benefit Exclusion**

Laboratory services for the purpose of obtaining a marriage license or to determine paternity are not covered benefits.

### **Examples of Covered Benefits**

1. All laboratory services provided in conjunction with periodic health evaluations or as determined medically necessary.
2. Pre-surgical diagnostic testing.
3. Laboratory services performed during an authorized inpatient hospitalization.
4. Microalbuminuria, HDL/LDL and Hemoglobin A-1C.

### **Examples of Non-Covered Benefits**

1. Lab services to obtain a marriage license.
2. Lab services to determine paternity.