

**LipoScience Contact: Michelle Turenne
919-256-1306**

**For Immediate Release
Raleigh, NC: December 2, 2005**

Significant Decision Gives Patients Better Access to Heart Disease Test

AMA's CPT Editorial Panel and CMS recognize LipoScience's NMR LipoProfile® test in important coding and payment decision

Wednesday, November 23, 2005, the Centers for Medicare & Medicaid Services (CMS) announced a Medicare reimbursement rate for CPT code 83704, a new code that describes the main component of the *NMR LipoProfile*® test. This test is used to help identify patients at risk for heart disease and determine optimal cardiovascular drug therapy. Earlier this year, the American Medical Association's (AMA) Current Procedural Terminology (CPT) Editorial Panel established a unique Category I code, 83704, described as "*the quantitation of lipoprotein particle numbers and lipoprotein subclasses when measured (e.g. nuclear magnetic resonance spectroscopy).*" The establishment of a new code and a CMS payment rate are key steps in making new medical technologies more widely available to patients.

"This decision is significant. It is the first time the CPT Editorial Panel and the Center for Medicare & Medicaid Services have recognized and designated a specific code for the quantitation of lipoprotein particle numbers. This code has set a precedent and will help establish coding and payment for other future applications of nuclear magnetic resonance (NMR) spectroscopy as an accepted tool for therapeutic decision making," says Richard O. Brajer, President and Chief Executive Officer of LipoScience, Inc. He adds, "With a specific procedure code and established federal pricing, private health insurance providers are more likely to cover the *NMR LipoProfile* test, providing even more access to patients at risk for heart disease."

For the millions of patients in the United States at risk for coronary heart disease (CHD), this is good news. "The availability of information about the lipoprotein particles that carry cholesterol through the body is important clinically as heart disease is still the number one cause of death in the United States, despite an intense focus on cholesterol management," states Dr. Michael Varveris, Medical Director of the Heart Attack Prevention Institute of Naples, Florida.

"Approximately half of patients that have a coronary event have normal or near-normal LDL cholesterol," he added. "Patients with a high number of LDL particles (LDL-P) are considered by many physicians to be at increased risk for heart disease, even if they have "normal" cholesterol levels. Recognition by the AMA and CMS is a key step in making the *NMR LipoProfile* test more available to identify patients with higher particle counts and treat them effectively."

Not only does the NMR LipoProfile report provide lipoprotein particle number, it also provides information about lipoprotein subclasses which allow clinicians make better

decisions to minimize an individual patient's risk for heart disease – risk that could have been missed using standard lipid information alone.

"In the past, we were included in another Category I code that did not provide differentiation between various technologies. This made it confusing for payors and physicians alike to understand the true value of measuring lipoproteins via NMR", says James Fries, Vice President of Payor Relations for LipoScience, Inc. "Therefore, it was up to LipoScience to provide evidence that the measurement of lipoprotein particles as a tool for managing heart disease was consistent with contemporary medical practice and was being used by many practitioners in multiple locations."

LipoScience was able to demonstrate to the AMA's CPT Editorial Panel that the NMR technology is established among treating physicians. CMS has established a fair reimbursement rate of \$44.08 for CPT code 83704, the new code for measuring lipoproteins using NMR.

Headquartered in Raleigh, N.C., LipoScience develops and markets new clinical applications of NMR spectroscopy in the areas of cardiovascular disease and metabolic disorders. Its flagship product, the *NMR LipoProfile* blood test, was introduced for clinical research in 1997 and for use in patient care in 1999.

Results previously reported from the Cardiovascular Health Study¹, Healthy Women Study² and PLAC-1³, among others, have all shown that numbers of atherogenic LDL particles to be more predictive of coronary heart disease events than LDL cholesterol.

For more information, please contact Michelle Turenne at 919-256-1306. Further information is available on the company's Web site: www.liposcience.com.

¹ Kuller LH, Arnold A, Tracy R, et al. Nuclear Magnetic Resonance (NMR) spectroscopy of lipoproteins and risk of coronary heart disease in the cardiovascular health study. *Atheroscler Thromb Vasc Biol.* 2002;22:1175-1180. Relevant Findings: LDL Particle Number (LDL-P) was the strongest predictor for the development of CHD in women. The association was independent of LDL cholesterol or other non-lipid measures.

² Mackey RH, Kuller, IH, Matthews KA, Sutton-Tyrrell K, Evans RW. Does hormone replacement therapy affect associations between carotid atherosclerosis in high-risk patients. *American Heart Association 41st Annual Conference on Cardiovascular Disease Epidemiology and Prevention.* February 2001. San Antonio, TX. Relevant findings: LDL particle number measured by NMR was the strongest lipid or lipoprotein predictor of carotid atherosclerosis, independent of standard lipid levels.

³ Mackey RH, Kuller LH, Sutton-Tyrrel K, Evans R, Rosenson RS, Otvos JD, Freedman DS. Relations of lipoprotein subclass levels and low-density lipoprotein size to progression of coronary artery disease in the pravastatin limitation of atherosclerosis in the coronary arteries (PLAC-I Trial). *Am J Cardiol.* 2002;90:89-94. Relevant Findings: LDL particle number measured by NMR was the best single predictor of the rate of cardiovascular disease progression.