

## Internal Medicine Coding Alert

### READER QUESTION: Dont Hold Your Breath Over O2

Question: Should we bill for oxygen administration and the oxygen?

South Carolina Subscriber

Answer: No CPT code exists for oxygen administration. Therefore, you should include the service in the E/M.

Although Medicare includes codes for oxygen-related supplies in the HCPCS level-two book, it covers these items for home use only. So, you should not charge Medicare for physician-used masks or tubing, such as A4620 (Variable concentration mask), A4621 (Tracheostomy mask or collar) and A4616 (Tubing [oxygen], per foot). Medicare covers these supplies under the durable medical equipment (DME) benefit, which allows payment for DME only if the beneficiary owns or is purchasing the equipment.

Commercial insurers may, however, reimburse for the supplies with the A codes. Some other private payers may reimburse for the supplies with 99070 (Supplies and materials [except spectacles], provided by the physician over and above those usually included with the office visit or other services rendered [list drugs, trays, supplies, or materials provided]). Consequently, you should ask the carrier for its requirements.