

Internal Medicine Coding Alert

You Be The Coder: Spirometry/Volume Loop Encounters

Question: The internist sees an established Medicare patient who is complaining of breathing trouble at the local hospital. The internist performs a complete spirometry and a respiratory flow volume loop. Can we report the spirometry and the loop separately?

Texas Subscriber

Answer: In your scenario, Medicare won't pay separately for the loop, though some private payers might. (Check your private carrier contracts for more specific information.)

When the insurer bundles the flow volume loop into the spirometry, report the following:

- 94010 (Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement[s], with or without maximal voluntary ventilation) for the spirometry
- modifier 26 (Professional component) linked to 94010 to show that you are billing for only the professional portion of the procedure when provided in a facility setting
- 786.05 (Shortness of breath) linked to 94010 to represent the patient's breathing trouble.