

Part B Insider (Multispecialty) Coding Alert

Reader Question: Cold Air Challenge Coding Doesn't Have to Be A Challenge

Question: Our pulmonologist performed a cold air challenge along with multiple spirometric measurements to evaluate a patient for asthma. What is the correct way to report this pulmonary function test? Also, let me know whether the spirometry measurements can be reported separately or not?

Answer: The right way of reporting a cold air challenge is by using 94070 (Bronchospasm provocation evaluation, multiple spirometric determinations as in 94010, with administered agents [e.g., antigen[s], cold air, methacholine]). As you see in the descriptor, the test makes use of multiple spirometric measurements to assess the effects of the cold air challenge. Since the descriptor clearly includes the spirometric measurements, you cannot report the spirometry separately with 94010 (Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement[s], with or without maximal voluntary ventilation).

Although the spirometric measurements are bundled into the codes for the cold air challenge test, you can report a spirometric measurement if it was performed prior to administering the challenge on the same date and the results generated the rationale for performing the challenge testing. You have to append modifier 59 (Distinct procedural service) to the spirometry code (94010). It is likely that the documentation will be requested for review prior to separate payment. Clear documentation will assist in obtaining the appropriate reimbursement.

When reporting a cold air challenge, if you are reporting the procedure only with 94070, you will only have reported the pulmonary function test. It is also essential to report the challenge test with 95071 (Inhalation bronchial challenge testing [not including necessary pulmonary function tests]; with antigens or gases, specify) separately for the administration of the challenge substance.

However, if your pulmonologist is interpreting studies performed in a PFT facility-based laboratory, then you will only be reporting PFT 94070 with modifier 26 (Professional component) appended to it. The laboratory facility who owns the equipment, space and staff used for the tests will report 94070 with modifier TC (Technical component) and 95071. It is also essential to remember that 95071 has no physician related RVUs and is part of a technical service only.