

Part B Insider (Multispecialty) Coding Alert

Reader Question: Insurers Won't Pay for These Supplies

Question: Can our family practice office bill a syringe code with a vaccine administration code to non-Medicare/Medicaid providers? Also, may I report nebulizer supplies such as the mask, mouthpiece and tubing with a nebulization?

Answer: Unfortunately, the answer is "no" to both of your questions. You should not code a syringe (A4206, Syringe with needle, sterile 1 cc, each; A4208, Syringe with needle, sterile 3 cc, each) in addition to vaccine administration. You also shouldn't bill a mask (A7015, Aerosol mask, used with DME nebulizer) or mouthpiece (A4617) and tubing (A4616, Tubing [oxygen], per foot) with a nebulization (94640, Pressurized or nonpressurized inhalation treatment for acute airway obstruction or for sputum induction for diagnostic purposes [e.g., with an aerosol generator, nebulizer, metered dose inhaler or intermittent positive pressure breathing [IPPB] device).

Why: The practice expense (PE) for vaccine administration codes and the nebulizer treatment code includes the related equipment, including the syringe, post-vaccine bandages, mask, mouthpiece, and tubing.

Remember: You may, however, code the medication, such as albuterol with the appropriate code (e.g., J7610 (Albuterol, inhalation solution, compounded product, administered through DME, concentrated form, 1 mg).