

## Part B Insider (Multispecialty) Coding Alert

## Reader Questions: 94640 + J Code: Go Full Circle with Albuterol Treatment

## Question:

My physician performed an albuterol treatment in the office. Can I bill for it?

## Answer:

Yes. You would use 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 [IPBB] device]) with the appropriate HCPCS J code. In this case, you have four choices:

J7611 (Albuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, concentrated form, 1 mg),

J7612 (Levalbuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, concentrated form, 0.5 mg),

J7613 (Albuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose, 1 mg), or

J7614 (Levalbuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose, 0.5 mg).

Heads up: Don't forget to report the office visit for the evaluation and management service that took place which led the decision for the treatment. Most payers will want you to append modifier 25 on the E/M.