

CPT® 95012 Nitric Oxide Expired Gas Determination (Exhaled NO, eNO, F_{ENO})

Introduction

CPT® 95012 was established in 2007 to describe nitric oxide expired gas determination. This test is performed prior to and after the initiation of anti-inflammatory treatment in order to determine whether the anti-inflammatory treatment is appropriate, as well as to monitor asthma control. CPT® 95012 differs from Category III code 0064T in that it is not performed using spectroscopy. CPT® 95012 is a procedure performed using an exhaled nitric oxide monitoring system.

Clinical Example

An adult or pediatric patient with suspected or confirmed airway inflammation such as bronchial asthma.

Description of Procedure

If a diagnosis of asthma is suspected, based on symptoms or lung function criteria, exhaled nitric oxide (NO) would be measured. Exhaled NO would also be measured as part of the ongoing monitoring of known asthmatics. Exhaled NO measurements before and after anti-inflammatory treatment initiation would provide information about response to therapy and, when measured serially, can assist in optimizing anti-inflammatory dose, and predict loss of control.

An assessment of the resulting exhaled NO value gives the physician awareness into the inflammatory status of the patient. Exhaled NO is used to assess the inflammatory status and, based on the result, the anti-inflammatory intervention, can be adjusted accordingly.

This procedure includes inspiration of NO-free air to total lung capacity, followed immediately by exhalation at an even flow rate into the exhaled NO monitoring system.

Physician Coding (1500 Claim Form)

CPT® Coding

CPT® Code	2009 Medicare Payment	2008 Medicare Payment
95012	\$19.48	\$19.04

2009 Medicare Physician Fee Schedule Conversion Factor \$36.0666 per relative value unit has a total relative value unit of 0.54RVU. See the Physician Fee Schedule Look-Up page on the CMS website at: <http://www.cms.hhs.gov/PFSlookup/>.

In 2007, CPT® introduced a new code 95012, Nitric oxide expired gas determination for measurement of exhaled nitric oxide (NO). Analysis of individual patient data is performed to track the degree of inflammation and the change of inflammation since the last visit.¹

Like pulse oximetry, CPT® 95012 can be billed only as a global code and cannot be separated into technical and professional components. As the instrument produces an exhaled NO value requiring little interpretation, no physician wRVUs were assigned. In contrast to the pulse oximetry codes, CCI edits allow exhaled NO to be billed along with an E/M code during an office visit, appended with modifier 25. CPT® 95012 is a practice expense only code. If there is physician work, a separate evaluation and management code should be reported with modifier 25.²

AMA 2008 CodeManager states that CPT® 95012 is provided “incident to” a physician service when they are provided by auxiliary personnel (e.g., Respiratory Therapist, nurse) employed by the physician and working under his or her direct personal supervision.

ICD-9-CM Diagnosis Coding

Asthma ICD-9-CM diagnosis codes range from 493.00 through 493.92 and should reflect the highest level of specificity possible.

Hospital Outpatient Depts. & Free-Standing Facilities Coding (UB-04 Form)

CPT® Coding

When performed in a hospital setting, CPT® 95012 is payable under the Outpatient Prospective Payment System (OPPS) (APC 0367 Level 1 Pulmonary Test) with a 2008 payment rate of \$36.16.

ICD-9-CM Procedure Coding

ICD-9-CM Procedure code 89.38 - Other non-operative respiratory measurements is typically the most appropriate procedure code.

ICD-9-CM Diagnosis Coding

Asthma ICD-9-CM diagnosis codes range from 493.00 through 493.92 and should reflect the highest level of specificity possible.

References

1. *CPT 2007 Changes*. Chicago, IL: American Medical Association, 2006; and *AMA CPT Assistant*. Chicago, IL: April 2007:Vol 17 (4), p6.
2. Manaker SM, Krier-Morrow D, Pohlig C. *Coding for Chest Medicine 2009*. 13th ed. Chapter 15 Diamond, E. Pulmonary Function and Exercise Testing. Northbrook, IL: American College of Chest Physicians, 2009.

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