The current Procedural Terminology (CPT) codes defined below are the most common used to describe spirometry procedures performed with the Micro Direct spirometers.

### CPT CODE TEST DESCRIPTION

<table>
<thead>
<tr>
<th>CPT Code</th>
<th>Test Description</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>94010</td>
<td><strong>Spirometry Complete</strong>, includes graphic record total and timed vital capacity, expiratory flow rate measurement(s) with or without maximal voluntary ventilation</td>
<td>$37.08</td>
</tr>
<tr>
<td>94060</td>
<td><strong>Bronchodilation Responsiveness</strong>, spirometry as in 94010, pre- and post bronchodilator or exercise</td>
<td>$62.57</td>
</tr>
<tr>
<td>94070</td>
<td><strong>Bronchospasm Provocation Evaluation</strong>, multiple spirometric determinations as in 94010, with administered agents (e.g. antigen(s), cold air, methacholine).</td>
<td>$61.08</td>
</tr>
<tr>
<td>94200</td>
<td><strong>Lung Function Test (MBC/MVV)</strong> - Maximum Voluntary Ventilation</td>
<td>$26.16</td>
</tr>
<tr>
<td>94620</td>
<td><strong>Pulmonary Stress Test/Simple</strong> (Prolonged exercise with pre and post test spirometry)</td>
<td>$57.44</td>
</tr>
<tr>
<td>94016</td>
<td><strong>Review Patient Spirometry</strong>, 30 day period of time; physician review and interpretation only</td>
<td>$26.15</td>
</tr>
<tr>
<td>94375</td>
<td><strong>Respiratory Flow Volume Loop</strong></td>
<td>$40.36</td>
</tr>
<tr>
<td>95070</td>
<td><strong>Inhalation Bronchial Challenge Testing</strong>, (not including necessary pulmonary function tests), with histamine, methacholine or similar compounds.</td>
<td>$30.93</td>
</tr>
<tr>
<td>95071</td>
<td><strong>Inhalation Bronchial Challenge Testing</strong>, (not including necessary pulmonary function tests), with specified antigens or gases</td>
<td>$35.66</td>
</tr>
<tr>
<td>94664</td>
<td><strong>Bronchodilator Administration</strong>, demonstration and/or evaluation of patient utilization of an aerosol generator, nebulizer, meter dose inhaler or IPPB device.</td>
<td>$17.82</td>
</tr>
</tbody>
</table>
Many Medicare Part B carriers have published Local Medical Review Policies (LMRP) that describes specific coverage guidelines for spirometry procedures. For definitive coverage and payment information, contact your local Part B carrier.

*The material referenced and provided is based upon research current at the time of printing. The final decision of billing for any product or procedure must be made by the provider of care, considering the medical necessity of the services and supplies provided, the regulations of insurance carriers and any local, state or federal laws that apply to the supplies and services rendered. We are providing this information in an educational capacity with the understanding that we are not engaged or rendering legal, accounting or other professional services or advice.

Note that applicable laws, rules and regulations may change. While we will use reasonable efforts to update the guide regularly, this guide should not be relied upon as a current or comprehensive statement of all applicable laws, rules and regulations.