

#### Description

A nebulizer is used to produce a fine mist that is delivered to the respiratory system.

### Policy

A nebulizer is considered reasonable and necessary when a member meets coverage criteria.

### **Policy Guidelines**

### Medicare Member Coverage Criteria:

Refer to Medicare policy (L33370) and article (A52466) for coverage criteria.

#### Non-Medicare Member Coverage Criteria:

### **Coverage Criteria:**

For WellSense and Health New England members ages 0 to 18 – refer to specific subset criteria at end of policy section for small volume nebulizer criteria.

A small volume nebulizer (A7003, A7004, A7005), related compressor (E0570) and FDA-approved inhalation solutions of the drugs listed below are covered when:

- a. It is reasonable and necessary to administer albuterol (J7611, J7613), arformoterol (J7605), budesonide (J7626), cromolyn (J7631), formoterol (J7606), ipratropium (J7644), levalbuterol (J7612, J7614), metaproterenol (J7669) or revefenacin (J7677) for the management of obstructive pulmonary disease (Reference the Diagnosis Codes that Support Medical Necessity Group 8 Codes section for applicable diagnoses); or
- b. It is reasonable and necessary to administer dornase alfa (J7639) to a member with cystic fibrosis (Reference the Diagnosis Codes that Support Medical Necessity Group 9 Codes section for applicable diagnoses); or
- c. It is reasonable and necessary to administer tobramycin (J7682) to a member with cystic fibrosis or bronchiectasis (Reference the Diagnosis Codes that Support Medical Necessity Group 10 Codes section for applicable diagnoses); or
- d. It is reasonable and necessary to administer pentamidine (J2545) to a member with HIV, pneumocystosis, or complications of organ transplants (Reference the



Diagnosis Codes that Support Medical Necessity Group 4 Codes section for applicable diagnoses); or

e. It is reasonable and necessary to administer acetylcysteine (J7608) for persistent thick or tenacious pulmonary secretions (Reference the Diagnosis Codes that Support Medical Necessity Group 7 Codes section for applicable diagnoses).

Compounded inhalation solutions (J7604, J7607, J7609, J7610, J7615, J7622, J7624, J7627, J7628, J7629, J7632, J7634, J7635, J7636, J7637, J7638, J7640, J7641, J7642, J7643, J7645, J7647, J7650, J7657, J7660, J7667, J7670, J7676, J7680, J7681, J7683, J7684, J7685, and compounded solutions billed with J7699) will be denied as not reasonable and necessary.

If none of the drugs used with a nebulizer are covered, the compressor, the nebulizer, and other related accessories/supplies will be denied as not reasonable and necessary.

A large volume nebulizer (A7007, A7017), related compressor (E0565 or E0572), and water or saline (A4217 or A7018) are considered for coverage when it is reasonable and necessary to deliver humidity to a member with thick, tenacious secretions, who has cystic fibrosis, bronchiectasis, a tracheostomy, or a tracheobronchial stent (Reference the Diagnosis Codes that Support Medical Necessity Group 5 Codes section for applicable diagnoses). Combination code E0585 will be covered for the same indications.

An E0565 or E0572 compressor and filtered nebulizer (A7006) are considered for coverage when it is reasonable and necessary to administer pentamidine to members with HIV, pneumocystosis, or complications of organ transplants (Reference the Diagnosis Codes that Support Medical Necessity Group 1 Codes section for applicable diagnoses).

A small volume ultrasonic nebulizer (E0574) and related accessories are considered for coverage when it is reasonable and necessary to administer treprostinil inhalation solution only. Claims for code E0574 used with other inhalation solutions will be denied as not reasonable and necessary.

HCPCS code K0730 describes a controlled dose inhalation drug delivery system. Aerosol is delivered in pulses during the inspiration. The duration of each pulse is adapted according to the breathing pattern.

Treprostinil inhalation solution (J7686) is considered for coverage when either criteria 1-3; **or**, criterion 4 are met:

1. The member has a diagnosis of pulmonary artery hypertension (Reference the Diagnosis Codes that Support Medical Necessity Group 11 Codes section for applicable diagnoses); and



- 2. The pulmonary hypertension is not secondary to pulmonary venous hypertension (e.g., left sided atrial or ventricular disease, left sided valvular heart disease, etc) or disorders of the respiratory system (e.g., chronic obstructive pulmonary disease, interstitial lung disease, obstructive sleep apnea or other sleep disordered breathing, alveolar hypoventilation disorders, etc.); and
- 3. The member has primary pulmonary hypertension or pulmonary hypertension which is secondary to one of the following conditions: connective tissue disease, human immunodeficiency virus (HIV) infection, cirrhosis, anorexigens or congenital left to right shunts. If these conditions are present, the following criteria (a-d) must be met:
  - a. The pulmonary hypertension has progressed despite maximal medical and/or surgical treatment of the identified condition; and
  - b. The mean pulmonary artery pressure is > 25 mm Hg at rest or > 30 mm Hg with exertion; and
  - c. The member has significant symptoms from the pulmonary hypertension (i.e., severe dyspnea on exertion, and either fatigability, angina, or syncope); and
  - d. Treatment with oral calcium channel blocking agents has been tried and failed or has been considered and ruled out.
- 4. The beneficiary has a diagnosis of pulmonary hypertension associated with interstitial lung disease (refer to Group 11 Codes in the LCD-related Policy Article for applicable diagnoses) and the following criteria (a-e) are met:
  - a. The presence of interstitial lung disease has been confirmed by a high-resolution CT scan of the chest; and
  - b. The mean pulmonary artery pressure is  $\geq 25$  mm Hg; and
  - c. The pulmonary capillary wedge pressure or left ventricular end-diastolic pressure is  $\leq$  15mm Hg; and
  - d. The pulmonary vascular resistance is  $\geq$  3 Wood Units at rest; and
  - e. The beneficiary has significant symptoms of pulmonary hypertension (e.g., dyspnea on exertion, fatigability).

If the above criteria are not met, code E0574 and the related drug treprostinil (J7686) will be denied as not reasonable and necessary.



A controlled dose inhalation drug delivery system (K0730) is considered for coverage when it is reasonable and necessary to deliver iloprost (Q4074) to members with pulmonary hypertension only (Reference the Diagnosis Codes that Support Medical Necessity Group 14 Codes section for applicable diagnoses). Claims for code K0730 for use with other inhalation solutions will be denied as not reasonable and necessary.

Iloprost (Q4074) is considered for coverage when all of the following criteria 1-3 are met:

- 1. The beneficiary has a diagnosis of pulmonary artery hypertension (refer to the Group 14 Codes in the LCD-related Policy Article for applicable diagnoses); and
- 2. The pulmonary hypertension is not secondary to pulmonary venous hypertension (e.g., left sided atrial or ventricular disease, left sided valvular heart disease) or disorders of the respiratory system (e.g., chronic obstructive pulmonary disease, interstitial lung disease, obstructive sleep apnea or other sleep disordered breathing, alveolar hypoventilation disorders); and
- 3. The beneficiary has primary pulmonary hypertension or pulmonary hypertension which is secondary to one of the following conditions: connective tissue disease, human immunodeficiency virus (HIV) infection, cirrhosis, anorexigens or congenital left to right shunts. If these conditions are present, the following criteria (a-d) must be met:
  - a. The pulmonary hypertension has progressed despite maximal medical and/or surgical treatment of the identified condition; and
  - b. The mean pulmonary artery pressure is > 25 mm Hg at rest or > 30 mm Hg with exertion; and
  - c. The beneficiary has significant symptoms from the pulmonary hypertension (i.e., severe dyspnea on exertion, and either fatigability, angina, or syncope); and
  - d. Treatment with oral calcium channel blocking agents has been tried and failed or has been considered and ruled out.

If the above criteria are not met, code K0730 and the related drug iloprost (Q4074) will be denied as not reasonable and necessary.

A large volume ultrasonic nebulizer (E0575) offers no proven clinical advantage over a pneumatic compressor and nebulizer and will be denied as not reasonable and necessary.

### ACCESSORIES:



Accessories are separately payable if the related aerosol compressor and the individual accessories are reasonable and necessary. The following table lists the compressor/generator, which is related to the accessories described. Other compressor/generator/accessory combinations are considered not reasonable and necessary.

Compressor Generator	Related Accessories
E0565	A4619, A7006, A7007, A7010, A7011, A7012, A7013, A7014, A7015,
E0303	A7017, A7525, E1372
E0570	A7003, A7004, A7005, A7006, A7013, A7015, A7525
E0572	A7006, A7014
E0574	A7013, A7014, A7016
E0585	A4619, A7006, A7010, A7011, A7012, A7013, A7014, A7015, A7525
K0730	A7005

This array of accessories represents all possible combinations but it may not be appropriate to bill any or all of them for one device.

The following table lists the usual maximum frequency of replacement for accessories. Claims for more than the usual maximum replacement amount will be denied as not reasonable and necessary.

#### Accessory

#### **Usual Maximum Replacement**

- A4619 One/month
- A7003 Two/month
- A7004 Two/month (in addition to A7003)
- A7005 One/6 months
- A7005 One/3 months only with K0730
- A7006 One/month
- A7007 Two/month
- A7010 One unit (100 ft.)/2 months
- A7011 One/year
- A7012 Two/month
- A7013 Two/month
- A7014 One/3 months
- A7015 One/month
- A7016 Two/year
- A7017 One/3 years
- A7525 One/month
- E1372 One/3 years

### **INHALATION DRUGS AND SOLUTIONS:**



The following table represents the maximum milligrams/month of inhalation drugs that are reasonable and necessary for each nebulizer drug.

Inhalation Drugs and Solutions	Maximum Milligrams/Month
Acetylcysteine	74 grams/month
Albuterol	465 mg/month (See below for exception)
Albuterol/Ipratropium combination	186 units/month
Arformoterol	930 micrograms per month – 62 units per month
Budesonide	62 units per month
Cromolyn sodium	2480 mg/month – 248 units/month
Dornase alfa	78 mg/month
Formoterol	1240 micrograms per month – 62 units per month
Ipratropium bromide	93 mg/month
Levalbuterol	232.5 mg/month – 465 units/month (See below for exception)
Metaproterenol	2800 mg/month – 280 units per month (See below for exception)
Pentamidine	300 mg/month
Revefenacin	5250 mcg/month
Treprostinil	31 units/month
Sterile saline or water, 10ml/unit (A4216, A4218)	56 units/month
Distilled water, sterile water, or sterile salin in large volume nebulizer	<sup>e</sup> 18 liters/month

When albuterol, levalbuterol, or metaproterenol are prescribed as rescue/supplemental medication for members who are taking formoterol or arformoterol, the maximum milligrams/month that are reasonably billed are:

Drug	Maximum Milligrams/Month
Albuterol	78 mg/month
Albuterol/Ipratroprium combination	31 units/month
Levalbuterol	39 mg/month – 78 units/month
Metaproterenol	470  mg/month - 47  units/month

Claims for more than these amounts of drugs will be denied as not reasonable and necessary.



When a "concentrated form" of an inhalation drug is covered, separate saline solution (A4216 or A4218 [metered dose]) used to dilute it will be separately reimbursed. Saline dispensed for the dilution of concentrated nebulizer drugs must be billed on the same claim as the drug(s) being diluted. If the unit dose form of the drug is dispensed, separate saline solution (A4216 or A4218 [metered dose]), will be denied as not reasonable and necessary. Water or saline in 500 or 1000 ml quantities (A4217 or A7018) are not appropriate for use by members to dilute inhalation drugs and will therefore be denied as not reasonable and necessary if used for this purpose. These codes are only reasonable and necessary when used in a large volume nebulizer (A7007, A7017, or E0585).

Albuterol, levalbuterol, and metaproterenol are all short-acting bronchodilators with betaadrenergic stimulatory effect. It is not reasonable and necessary for a member to use more than one of these at a time. The use of more than one of these drugs at the same time will be denied as not reasonable and necessary.

Albuterol, levalbuterol, or metaproterenol is covered if it is used as a rescue/supplemental medication in addition to the long-acting beta-adrenergic agonist drug, formoterol or arformoterol.

Formoterol and arformoterol are long-acting bronchodilators with beta-adrenergic stimulatory effect. It is not reasonable and necessary for a member to use more than one of these at a time. The use of more than one of these drugs at the same time will be denied as not reasonable and necessary.

Revefenacin (J7677) is a long-acting muscarinic antagonist. Concurrent use of longacting and short-acting muscarinic antagonists, such as ipratropium (J7644) is not reasonable and necessary. Therefore, if a long-acting muscarinic antagonist is used, the short-acting muscarinic antagonist will be denied as not reasonable and necessary.

Code J7620 describes the FDA-approved unit dose combination of albuterol base 2.5 mg and ipratropium bromide 0.5 mg in unit dose vials. The medical necessity for administering additional albuterol sulfate (J7611, J7613), levalbuterol (J7612, J7614) and/or ipratropium bromide (J7644) has not been established. Claims for J7611-J7614 and J7644 billed in addition to J7620 will be denied as not reasonable and necessary.

Charges for the drugs, diluent, and dispensing fees may only be billed by the entity that actually dispenses the drug to the Medicare member and that entity must be permitted under all applicable federal, state, and local laws and regulations to dispense drugs. Only entities licensed in the state where they are physically located may submit a claim for nebulizer drugs. Physicians may submit a claim for drugs if all of the following conditions are met: the physician is 1) enrolled as a DMEPOS supplier with the National Supplier Clearinghouse, and 2) dispensing the drug(s) to the Medicare member, and 3)



authorized by the State to dispense drugs as part of the physician's license. Claims submitted by entities not licensed to dispense drugs will be denied for lack of medical necessity.

### Group 1 Codes:

HCPCS	Description
F05(5	COMPRESSOR, AIR POWER SOURCE FOR EQUIPMENT WHICH IS
E0565	NOT SELF- CONTAINED OR CYLINDER DRIVEN
E0570	NEBULIZER, WITH COMPRESSOR
E0572	AEROSOL COMPRESSOR, ADJUSTABLE PRESSURE, LIGHT DUTY
E0372	FOR INTERMITTENT USE
E0574	ULTRASONIC/ELECTRONIC AEROSOL GENERATOR WITH SMALL
E0574	VOLUME NEBULIZER
E0575	NEBULIZER, ULTRASONIC, LARGE VOLUME
E0585	NEBULIZER, WITH COMPRESSOR AND HEATER
K0730	CONTROLLED DOSE INHALATION DRUG DELIVERY SYSTEM

### **Group 2 Paragraph: ACCESSORIES**

### Group 2 Codes:

HCPCS	Description
A4619	FACE TENT
A7003	ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED
A7003	PNEUMATIC NEBULIZER, DISPOSABLE
A7004	SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER,
A7004	DISPOSABLE
A7005	ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED
A7003	PNEUMATIC NEBULIZER, NON-DISPOSABLE
A7006	ADMINISTRATION SET, WITH SMALL VOLUME FILTERED
A7000	PNEUMATIC NEBULIZER
A7007	LARGE VOLUME NEBULIZER, DISPOSABLE, UNFILLED, USED
A7007	WITH AEROSOL COMPRESSOR
A7008	LARGE VOLUME NEBULIZER, DISPOSABLE, PREFILLED, USED
A7008	WITH AEROSOL COMPRESSOR
17000	RESERVOIR BOTTLE, NON-DISPOSABLE, USED WITH LARGE
A7009	VOLUME ULTRASONIC NEBULIZER
A 7010	CORRUGATED TUBING, DISPOSABLE, USED WITH LARGE
A7010	VOLUME NEBULIZER, 100 FEET
A 7011	CORRUGATED TUBING, NON-DISPOSABLE, USED WITH LARGE
A7011	VOLUME NEBULIZER, 10 FEET



A7012	WATER COLLECTION DEVICE, USED WITH LARGE VOLUME
	NEBULIZER
A7013	FILTER, DISPOSABLE, USED WITH AEROSOL COMPRESSOR OR
A7015	ULTRASONIC GENERATOR
A7014	FILTER, NONDISPOSABLE, USED WITH AEROSOL COMPRESSOR
A7014	OR ULTRASONIC GENERATOR
A7015	AEROSOL MASK, USED WITH DME NEBULIZER
A7016	DOME AND MOUTHPIECE, USED WITH SMALL VOLUME
A/010	ULTRASONIC NEBULIZER
A7017	NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC,
A/01/	BOTTLE TYPE, NOT USED WITH OXYGEN
A7525	TRACHEOSTOMY MASK, EACH
E0590	NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC,
E0580	BOTTLE TYPE, FOR USE WITH REGULATOR OR FLOWMETER
E1372	IMMERSION EXTERNAL HEATER FOR NEBULIZER

### Group 3 Paragraph: INHALATION DRUGS AND SOLUTIONS

### Group 3 Codes:

HCPCS	Description
A4216	STERILE WATER, SALINE AND/OR DEXTROSE, DILUENT/FLUSH,
	10 ML
A4217	STERILE WATER/SALINE, 500 ML
A4218	STERILE SALINE OR WATER, METERED DOSE DISPENSER, 10 ML
A7018	WATER, DISTILLED, USED WITH LARGE VOLUME NEBULIZER,
A/018	1000 ML
G0333	PHARMACY DISPENSING FEE FOR INHALATION DRUG(S);
00555	INITIAL 30-DAY SUPPLY AS A BENEFICIARY
	PENTAMIDINE ISETHIONATE, INHALATION SOLUTION, FDA-
J2545	APPROVED FINAL PRODUCT, NON-COMPOUNDED,
	ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER 300 MG
	ACETYLCYSTEINE, INHALATION SOLUTION, COMPOUNDED
J7604	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER GRAM
	ARFORMOTEROL, INHALATION SOLUTION, FDA APPROVED
J7605	FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED
	THROUGH DME, UNIT DOSE FORM, 15 MICROGRAMS
	FORMOTEROL FUMARATE, INHALATION SOLUTION, FDA
J7606	APPROVED FINAL PRODUCT, NON-COMPOUNDED,
	ADMINISTERED THROUGH DME, UNIT DOSE FORM, 20



	MICROGRAMS
	LEVALBUTEROL, INHALATION SOLUTION, COMPOUNDED
J7607	PRODUCT, ADMINISTERED THROUGH DME, CONCENTRATED
	FORM, 0.5 MG
J7608	ACETYLCYSTEINE, INHALATION SOLUTION, FDA-APPROVED
	FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED
	THROUGH DME, UNIT DOSE FORM, PER GRAM
17(00	ALBUTEROL, INHALATION SOLUTION, COMPOUNDED
J7609	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE, 1 MG
	ALBUTEROL, INHALATION SOLUTION, COMPOUNDED
J7610	PRODUCT, ADMINISTERED THROUGH DME, CONCENTRATED
	FORM, 1 MG
	ALBUTEROL, INHALATION SOLUTION, FDA-APPROVED FINAL
J7611	PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME,
	CONCENTRATED FORM, 1 MG
	LEVALBUTEROL, INHALATION SOLUTION, FDA-APPROVED
J7612	FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED
	THROUGH DME, CONCENTRATED FORM, 0.5 MG
	ALBUTEROL, INHALATION SOLUTION, FDA-APPROVED FINAL
J7613	PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME,
	UNIT DOSE, 1 MG
	LEVALBUTEROL, INHALATION SOLUTION, FDA-APPROVED
J7614	FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED
	THROUGH DME, UNIT DOSE, 0.5 MG
J7615	LEVALBUTEROL, INHALATION SOLUTION, COMPOUNDED
57015	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE, 0.5 MG
	ALBUTEROL, UP TO 2.5 MG AND IPRATROPIUM BROMIDE, UP TO
J7620	0.5 MG, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED,
	ADMINISTERED THROUGH DME
	BECLOMETHASONE, INHALATION SOLUTION, COMPOUNDED
J7622	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER MILLIGRAM
J7624	BETAMETHASONE, INHALATION SOLUTION, COMPOUNDED
	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER MILLIGRAM
	BUDESONIDE, INHALATION SOLUTION, FDA-APPROVED FINAL
J7626	PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME,
	UNIT DOSE FORM, UP TO 0.5 MG
J7627	BUDESONIDE, INHALATION SOLUTION, COMPOUNDED
J/02/	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,



	UP TO 0.5 MG
	BITOLTEROL MESYLATE, INHALATION SOLUTION,
J7628	COMPOUNDED PRODUCT, ADMINISTERED THROUGH DME,
	CONCENTRATED FORM, PER MILLIGRAM
	BITOLTEROL MESYLATE, INHALATION SOLUTION,
J7629	COMPOUNDED PRODUCT, ADMINISTERED THROUGH DME, UNIT
	DOSE FORM, PER MILLIGRAM
	CROMOLYN SODIUM, INHALATION SOLUTION, FDA-APPROVED
J7631	FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED
	THROUGH DME, UNIT DOSE FORM, PER 10 MILLIGRAMS
	CROMOLYN SODIUM, INHALATION SOLUTION, COMPOUNDED
J7632	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER 10 MILLIGRAMS
	BUDESONIDE, INHALATION SOLUTION, COMPOUNDED
J7634	PRODUCT, ADMINISTERED THROUGH DME, CONCENTRATED
	FORM, PER 0.25 MILLIGRAM
	ATROPINE, INHALATION SOLUTION, COMPOUNDED PRODUCT,
J7635	ADMINISTERED THROUGH DME, CONCENTRATED FORM, PER
	MILLIGRAM
	ATROPINE, INHALATION SOLUTION, COMPOUNDED PRODUCT,
J7636	ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER
	MILLIGRAM
	DEXAMETHASONE, INHALATION SOLUTION, COMPOUNDED
J7637	PRODUCT, ADMINISTERED THROUGH DME, CONCENTRATED
	FORM, PER MILLIGRAM
	DEXAMETHASONE, INHALATION SOLUTION, COMPOUNDED
J7638	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER MILLIGRAM
	DORNASE ALFA, INHALATION SOLUTION, FDA-APPROVED
J7639	FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED
	THROUGH DME, UNIT DOSE FORM, PER MILLIGRAM
	FORMOTEROL, INHALATION SOLUTION, COMPOUNDED
J7640	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM, 12
	MICROGRAMS
	FLUNISOLIDE, INHALATION SOLUTION, COMPOUNDED
J7641	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE, PER
	MILLIGRAM
	GLYCOPYRROLATE, INHALATION SOLUTION, COMPOUNDED
J7642	PRODUCT, ADMINISTERED THROUGH DME, CONCENTRATED
	FORM, PER MILLIGRAM



J7643	GLYCOPYRROLATE, INHALATION SOLUTION, COMPOUNDED
	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER MILLIGRAM
J7644	IPRATROPIUM BROMIDE, INHALATION SOLUTION, FDA-
	APPROVED FINAL PRODUCT, NON-COMPOUNDED,
	ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER
	MILLIGRAM
	IPRATROPIUM BROMIDE, INHALATION SOLUTION,
J7645	COMPOUNDED PRODUCT, ADMINISTERED THROUGH DME, UNIT
	DOSE FORM, PER MILLIGRAM
	ISOETHARINE HCL, INHALATION SOLUTION, COMPOUNDED
J7647	PRODUCT, ADMINISTERED THROUGH DME, CONCENTRATED
	FORM, PER MILLIGRAM
	ISOETHARINE HCL, INHALATION SOLUTION, COMPOUNDED
J7650	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER MILLIGRAM
	ISOPROTERENOL HCL, INHALATION SOLUTION, COMPOUNDED
J7657	PRODUCT, ADMINISTERED THROUGH DME, CONCENTRATED
	FORM, PER MILLIGRAM
	ISOPROTERENOL HCL, INHALATION SOLUTION, COMPOUNDED
J7660	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER MILLIGRAM
	METAPROTERENOL SULFATE, INHALATION SOLUTION,
J7667	COMPOUNDED PRODUCT, CONCENTRATED FORM, PER 10
	MILLIGRAMS
	METAPROTERENOL SULFATE, INHALATION SOLUTION, FDA-
J7669	APPROVED FINAL PRODUCT, NON-COMPOUNDED,
57005	ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER 10
	MILLIGRAMS
	METAPROTERENOL SULFATE, INHALATION SOLUTION,
J7670	COMPOUNDED PRODUCT, ADMINISTERED THROUGH DME, UNIT
	DOSE FORM, PER 10 MILLIGRAMS
	PENTAMIDINE ISETHIONATE, INHALATION SOLUTION,
J7676	COMPOUNDED PRODUCT, ADMINISTERED THROUGH DME, UNIT
	DOSE FORM, PER 300 MG
	REVEFENACIN INHALATION SOLUTION, FDA-APPROVED FINAL
J7677	PRODUCT, NONCOMPOUNDED, ADMINISTERED THROUGH DME,
	1 MICROGRAM
J7680	TERBUTALINE SULFATE, INHALATION SOLUTION,
57000	COMPOUNDED PRODUCT, ADMINISTERED THROUGH DME,



	CONCENTRATED FORM, PER MILLIGRAM
J7681	TERBUTALINE SULFATE, INHALATION SOLUTION,
	COMPOUNDED PRODUCT, ADMINISTERED THROUGH DME, UNIT
	DOSE FORM, PER MILLIGRAM
	TOBRAMYCIN, INHALATION SOLUTION, FDA-APPROVED FINAL
J7682	PRODUCT, NON-COMPOUNDED, UNIT DOSE FORM,
	ADMINISTERED THROUGH DME, PER 300 MILLIGRAMS
	TRIAMCINOLONE, INHALATION SOLUTION, COMPOUNDED
J7683	PRODUCT, ADMINISTERED THROUGH DME, CONCENTRATED
	FORM, PER MILLIGRAM
	TRIAMCINOLONE, INHALATION SOLUTION, COMPOUNDED
J7684	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER MILLIGRAM
	TOBRAMYCIN, INHALATION SOLUTION, COMPOUNDED
J7685	PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM,
	PER 300 MILLIGRAMS
	TREPROSTINIL, INHALATION SOLUTION, FDA-APPROVED FINAL
J7686	PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME,
	UNIT DOSE FORM, 1.74 MG
J7699	NOC DRUGS, INHALATION SOLUTION ADMINISTERED THROUGH
J7099	DME
00512	PHARMACY DISPENSING FEE FOR INHALATION DRUG(S); PER 30
Q0513	DAYS
Q0514	PHARMACY DISPENSING FEE FOR INHALATION DRUG(S); PER 90
	DAYS
	ILOPROST, INHALATION SOLUTION, FDA-APPROVED FINAL
Q4074	PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME,
	UNIT DOSE FORM, UP TO 20 MICROGRAMS

### **ICD-10** Codes that Support Medical Necessity

**Group 1 Paragraph:** The presence of an ICD-10 code listed in this section is not sufficient by itself to assure coverage. Refer to the section on "Coverage Indications, Limitations and/or Medical Necessity" for other coverage criteria and payment information.

### For HCPCS codes A4619, E0565, E0572:

#### Group 1 Codes:



ICD-10 Code	Description
A15.0	Tuberculosis of lung
B20	Human immunodeficiency virus [HIV] disease
B59	Pneumocystosis
E84.0	Cystic fibrosis with pulmonary manifestations
J39.8	Other specified diseases of upper respiratory tract
J47.0	Bronchiectasis with acute lower respiratory infection
J47.1	Bronchiectasis with (acute) exacerbation
J47.9	Bronchiectasis, uncomplicated
J98.09	Other diseases of bronchus, not elsewhere classified
Q33.4	Congenital bronchiectasis
T86.00	Unspecified complication of bone marrow transplant
T86.01	Bone marrow transplant rejection
T86.02	Bone marrow transplant failure
T86.03	Bone marrow transplant infection
T86.09	Other complications of bone marrow transplant
T86.10	Unspecified complication of kidney transplant
T86.11	Kidney transplant rejection
T86.12	Kidney transplant failure
T86.13	Kidney transplant infection
T86.19	Other complication of kidney transplant
T86.20	Unspecified complication of heart transplant
T86.21	Heart transplant rejection
T86.22	Heart transplant failure
T86.23	Heart transplant infection
T86.290	Cardiac allograft vasculopathy
T86.298	Other complications of heart transplant
T86.30	Unspecified complication of heart-lung transplant
T86.31	Heart-lung transplant rejection
T86.32	Heart-lung transplant failure
T86.33	Heart-lung transplant infection
T86.39	Other complications of heart-lung transplant
T86.40	Unspecified complication of liver transplant
T86.41	Liver transplant rejection
T86.42	Liver transplant failure
DMEDOS Standard	



ICD-10 Code	Description	
T86.43	Liver transplant infection	
T86.49	Other complications of liver transplant	
T86.5	Complications of stem cell transplant	
T86.810	Lung transplant rejection	
T86.811	Lung transplant failure	
T86.812	Lung transplant infection	
T86.818	Other complications of lung transplant	
T86.819	Unspecified complication of lung transplant	
T86.830	Bone graft rejection	
T86.831	Bone graft failure	
T86.832	Bone graft infection	
T86.838	Other complications of bone graft	
T86.839	Unspecified complication of bone graft	
T86.850	Intestine transplant rejection	
T86.851	Intestine transplant failure	
T86.852	Intestine transplant infection	
T86.858	Other complications of intestine transplant	
T86.859	Unspecified complication of intestine transplant	
T86.890	Other transplanted tissue rejection	
T86.891	Other transplanted tissue failure	
T86.892	Other transplanted tissue infection	
T86.898	Other complications of other transplanted tissue	
T86.899	Unspecified complication of other transplanted tissue	
T86.90	Unspecified complication of unspecified transplanted organ and tissue	
T86.91	Unspecified transplanted organ and tissue rejection	
T86.92	Unspecified transplanted organ and tissue failure	
T86.93	Unspecified transplanted organ and tissue infection	
T86.99	Other complications of unspecified transplanted organ and tissue	
Z43.0	Encounter for attention to tracheostomy	
Z93.0	Tracheostomy status	



### Group 2 Paragraph: For HCPCS codes A7015, A7525:

### Group 2 Codes:

ICD-10 Code	Description		
A15.0	Tuberculosis of lung		
A22.1	Pulmonary anthrax		
A37.01	Whooping cough due to Bordetella pertussis with pneumonia		
A37.11	Whooping cough due to Bordetella parapertussis with pneumonia		
A37.81	Whooping cough due to other Bordetella species with pneumonia		
A37.91	Whooping cough, unspecified species with pneumonia		
A48.1	Legionnaires' disease		
B20	Human immunodeficiency virus [HIV] disease		
B25.0	Cytomegaloviral pneumonitis		
B44.0	Invasive pulmonary aspergillosis		
B59	Pneumocystosis		
B77.81	Ascariasis pneumonia		
E84.0	Cystic fibrosis with pulmonary manifestations		
J09.X1	Influenza due to identified novel influenza A virus with pneumonia		
J09.X2	Influenza due to identified novel influenza A virus with other respiratory manifestations		
J09.X3	Influenza due to identified novel influenza A virus with gastrointestinal manifestations		
J09.X9	Influenza due to identified novel influenza A virus with other manifestations		
J10.00	Influenza due to other identified influenza virus with unspecified type of pneumonia		
J10.01	Influenza due to other identified influenza virus with the same other identified influenza virus pneumonia		
J10.08	Influenza due to other identified influenza virus with other specified pneumonia		
J10.1	Influenza due to other identified influenza virus with other respiratory manifestations		
J10.2	Influenza due to other identified influenza virus with gastrointestinal manifestations		
J10.81	Influenza due to other identified influenza virus with encephalopathy		
J10.82	Influenza due to other identified influenza virus with myocarditis		
J10.83	Influenza due to other identified influenza virus with otitis media		
DMEPOS Standar			



J10.89	Influenza due to other identified influenza virus with other manifestations			
J11.00	Influenza due to unidentified influenza virus with unspecified type of pneumonia			
J11.08	Influenza due to unidentified influenza virus with specified pneumonia			
J11.1	Influenza due to unidentified influenza virus with other respiratory manifestations			
J11.2	Influenza due to unidentified influenza virus with gastrointestinal manifestations			
J11.81	Influenza due to unidentified influenza virus with encephalopathy			
J11.82	Influenza due to unidentified influenza virus with myocarditis			
J11.83	Influenza due to unidentified influenza virus with otitis media			
J11.89	Influenza due to unidentified influenza virus with other manifestations			
J12.0	Adenoviral pneumonia			
J12.1	Respiratory syncytial virus pneumonia			
J12.2	Parainfluenza virus pneumonia			
J12.3	Human metapneumovirus pneumonia			
J12.81	Pneumonia due to SARS-associated coronavirus			
J12.89	Other viral pneumonia			
J12.9	Viral pneumonia, unspecified			
J13	Pneumonia due to Streptococcus pneumoniae			
J14	Pneumonia due to Hemophilus influenzae			
J15.0	Pneumonia due to Klebsiella pneumoniae			
J15.1	Pneumonia due to Pseudomonas			
J15.20	Pneumonia due to staphylococcus, unspecified			
J15.211	Pneumonia due to Methicillin susceptible Staphylococcus aureus			
J15.212	Pneumonia due to Methicillin resistant Staphylococcus aureus			
J15.29	Pneumonia due to other staphylococcus			
J15.3	Pneumonia due to streptococcus, group B			
J15.4	Pneumonia due to other streptococci			
J15.5	Pneumonia due to Escherichia coli			
J15.61	Pneumonia due to Acinetobacter baumannii			
J15.69	Pneumonia due to other Gram-negative bacteria			
J15.7	Pneumonia due to Mycoplasma pneumoniae			
J15.8	Pneumonia due to other specified bacteria			
J15.9	Unspecified bacterial pneumonia			
J16.0	Chlamydial pneumonia			

# Northwood

J16.8	Pneumonia due to other specified infectious organisms			
J18.0	Bronchopneumonia, unspecified organism			
J18.1	Lobar pneumonia, unspecified organism			
J18.8	Other pneumonia, unspecified organism			
J18.9	Pneumonia, unspecified organism			
J39.8	Other specified diseases of upper respiratory tract			
J40	Bronchitis, not specified as acute or chronic			
J41.0	Simple chronic bronchitis			
J41.1	Mucopurulent chronic bronchitis			
J41.8	Mixed simple and mucopurulent chronic bronchitis			
J42	Unspecified chronic bronchitis			
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]			
J43.1	Panlobular emphysema			
J43.2	Centrilobular emphysema			
J43.8	Other emphysema			
J43.9	Emphysema, unspecified			
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection			
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation			
J44.81	Bronchiolitis obliterans and bronchiolitis obliterans syndrome			
J44.89	Other specified chronic obstructive pulmonary disease			
J44.9	Chronic obstructive pulmonary disease, unspecified			
J45.20	Mild intermittent asthma, uncomplicated			
J45.21	Mild intermittent asthma with (acute) exacerbation			
J45.22	Mild intermittent asthma with status asthmaticus			
J45.30	Mild persistent asthma, uncomplicated			
J45.31	Mild persistent asthma with (acute) exacerbation			
J45.32	Mild persistent asthma with status asthmaticus			
J45.40	Moderate persistent asthma, uncomplicated			
J45.41	Moderate persistent asthma with (acute) exacerbation			
J45.42	Moderate persistent asthma with status asthmaticus			
J45.50	Severe persistent asthma, uncomplicated			
J45.51	Severe persistent asthma with (acute) exacerbation			
J45.52	Severe persistent asthma with status asthmaticus			
J45.901	Unspecified asthma with (acute) exacerbation			
J45.902	Unspecified asthma with status asthmaticus			



J45.909	Unspecified asthma, uncomplicated		
J45.990	Exercise induced bronchospasm		
J45.991	Cough variant asthma		
J45.998	Other asthma		
J47.0	Bronchiectasis with acute lower respiratory infection		
J47.1	Bronchiectasis with (acute) exacerbation		
J47.9	Bronchiectasis, uncomplicated		
J60	Coalworker's pneumoconiosis		
J61	Pneumoconiosis due to asbestos and other mineral fibers		
J62.0	Pneumoconiosis due to talc dust		
J62.8	Pneumoconiosis due to other dust containing silica		
J63.0	Aluminosis (of lung)		
J63.1	Bauxite fibrosis (of lung)		
J63.2	Berylliosis		
J63.3	Graphite fibrosis (of lung)		
J63.4	Siderosis		
J63.5	Stannosis		
J63.6	Pneumoconiosis due to other specified inorganic dusts		
J64	Unspecified pneumoconiosis		
J65	Pneumoconiosis associated with tuberculosis		
J66.0	Byssinosis		
J66.1	Flax-dressers' disease		
J66.2	Cannabinosis		
J66.8	Airway disease due to other specific organic dusts		
J67.0	Farmer's lung		
J67.1	Bagassosis		
J67.2	Bird fancier's lung		
J67.3	Suberosis		
J67.4	Maltworker's lung		
J67.5	Mushroom-worker's lung		
J67.6	Maple-bark-stripper's lung		
J67.7	Air conditioner and humidifier lung		
J67.8	Hypersensitivity pneumonitis due to other organic dusts		
J67.9	Hypersensitivity pneumonitis due to unspecified organic dust		
J68.0	Bronchitis and pneumonitis due to chemicals, gases, fumes and vapors		
J68.1	Pulmonary edema due to chemicals, gases, fumes and vapors		
	ard Medical Policy Page 19 of 63 Confidential and Proprietary		

Nebulizers/Compressors (Medicare/Commercial/NH Medicaid)



J68.2	Upper respiratory inflammation due to chemicals, gases, fumes and vapors, not elsewhere classified		
J68.3	Other acute and subacute respiratory conditions due to chemicals, gases,		
108.5	fumes and vapors		
J68.4	Chronic respiratory conditions due to chemicals, gases, fumes and vapors		
J68.8	Other respiratory conditions due to chemicals, gases, fumes and vapors		
J68.9	Unspecified respiratory condition due to chemicals, gases, fumes and vapors		
J69.0	Pneumonitis due to inhalation of food and vomit		
J69.1	Pneumonitis due to inhalation of oils and essences		
J69.8	Pneumonitis due to inhalation of other solids and liquids		
J70.0	Acute pulmonary manifestations due to radiation		
J70.1	Chronic and other pulmonary manifestations due to radiation		
J70.2	Acute drug-induced interstitial lung disorders		
J70.3	Chronic drug-induced interstitial lung disorders		
J70.4	Drug-induced interstitial lung disorders, unspecified		
J70.5	Respiratory conditions due to smoke inhalation		
J70.8	Respiratory conditions due to other specified external agents		
J70.9	Respiratory conditions due to unspecified external agent		
J98.09	Other diseases of bronchus, not elsewhere classified		
Q33.4	Congenital bronchiectasis		
T86.00	Unspecified complication of bone marrow transplant		
T86.01	Bone marrow transplant rejection		
T86.02	Bone marrow transplant failure		
T86.03	Bone marrow transplant infection		
T86.09	Other complications of bone marrow transplant		
T86.10	Unspecified complication of kidney transplant		
T86.11	Kidney transplant rejection		
T86.12	Kidney transplant failure		
T86.13	Kidney transplant infection		
T86.19	Other complication of kidney transplant		
T86.20	Unspecified complication of heart transplant		
T86.21	Heart transplant rejection		
T86.22	Heart transplant failure		
T86.23	Heart transplant infection		
T86.290	Cardiac allograft vasculopathy		
T86.298	Other complications of heart transplant		



# Nebulizers/Compressors

T86.30	Unspecified complication of heart-lung transplant	
T86.31	Heart-lung transplant rejection	
T86.32	Heart-lung transplant failure	
T86.33	Heart-lung transplant infection	
T86.39	Other complications of heart-lung transplant	
T86.40	Unspecified complication of liver transplant	
T86.41	Liver transplant rejection	
T86.42	Liver transplant failure	
T86.43	Liver transplant infection	
T86.49	Other complications of liver transplant	
T86.5	Complications of stem cell transplant	
T86.810	Lung transplant rejection	
T86.811	Lung transplant failure	
T86.812	Lung transplant infection	
T86.818	Other complications of lung transplant	
T86.819	Unspecified complication of lung transplant	
T86.830	Bone graft rejection	
T86.831	Bone graft failure	
T86.832	Bone graft infection	
T86.838	Other complications of bone graft	
T86.839	Unspecified complication of bone graft	
T86.850	Intestine transplant rejection	
T86.851	Intestine transplant failure	
T86.852	Intestine transplant infection	
T86.858	Other complications of intestine transplant	
T86.859	Unspecified complication of intestine transplant	
T86.890	Other transplanted tissue rejection	
T86.891	Other transplanted tissue failure	
T86.892	Other transplanted tissue infection	
T86.898	Other complications of other transplanted tissue	
T86.899	Unspecified complication of other transplanted tissue	
T86.90	Unspecified complication of unspecified transplanted organ and tissue	
T86.91	Unspecified transplanted organ and tissue rejection	
T86.92	Unspecified transplanted organ and tissue failure	
T86.93	Unspecified transplanted organ and tissue infection	
T86.99	Other complications of unspecified transplanted organ and tissue	
OMEPOS Standar	rd Medical Policy Page 21 of 63 Confidential and Proprietar ressors (Medicare/Commercial/NH Medicaid)	

Nebulizers/Compressors (Medicare/Commercial/NH Medicaid)



Z43.0	Encounter for attention to tracheostomy
Z93.0	Tracheostomy status

### Group 3 Paragraph: For HCPCS codes A7003, A7004, E0570:

### Group 3 Codes:

ICD-10 Code	Description	
A15.0	Tuberculosis of lung	
A22.1	Pulmonary anthrax	
A37.01	Whooping cough due to Bordetella pertussis with pneumonia	
A37.11	Whooping cough due to Bordetella parapertussis with pneumonia	
A37.81	Whooping cough due to other Bordetella species with pneumonia	
A37.91	Whooping cough, unspecified species with pneumonia	
A48.1	Legionnaires' disease	
B20	Human immunodeficiency virus [HIV] disease	
B25.0	Cytomegaloviral pneumonitis	
B44.0	Invasive pulmonary aspergillosis	
B59	Pneumocystosis	
B77.81	Ascariasis pneumonia	
E84.0	Cystic fibrosis with pulmonary manifestations	
J09.X1	Influenza due to identified novel influenza A virus with pneumonia	
J09.X2	Influenza due to identified novel influenza A virus with other respiratory manifestations	
J09.X3	Influenza due to identified novel influenza A virus with gastrointestinal manifestations	
J09.X9	Influenza due to identified novel influenza A virus with other manifestations	
J10.00	Influenza due to other identified influenza virus with unspecified type of pneumonia	
J10.01	Influenza due to other identified influenza virus with the same other identified influenza virus pneumonia	
J10.08	Influenza due to other identified influenza virus with other specified pneumonia	
J10.1	Influenza due to other identified influenza virus with other respiratory manifestations	
J10.2	Influenza due to other identified influenza virus with gastrointestinal manifestations	



J10.81	Influenza due to other identified influenza virus with encephalopathy		
J10.82	Influenza due to other identified influenza virus with myocarditis		
J10.83	Influenza due to other identified influenza virus with otitis media		
J10.89	Influenza due to other identified influenza virus with other manifestations		
J11.00	Influenza due to unidentified influenza virus with unspecified type of pneumonia		
J11.08	Influenza due to unidentified influenza virus with specified pneumonia		
J11.1	Influenza due to unidentified influenza virus with other respiratory manifestations		
J11.2	Influenza due to unidentified influenza virus with gastrointestinal manifestations		
J11.81	Influenza due to unidentified influenza virus with encephalopathy		
J11.82	Influenza due to unidentified influenza virus with myocarditis		
J11.83	Influenza due to unidentified influenza virus with otitis media		
J11.89	Influenza due to unidentified influenza virus with other manifestations		
J12.0	Adenoviral pneumonia		
J12.1	Respiratory syncytial virus pneumonia		
J12.2	Parainfluenza virus pneumonia		
J12.3	Human metapneumovirus pneumonia		
J12.81	Pneumonia due to SARS-associated coronavirus		
J12.82	Pneumonia due to coronavirus disease 2019		
J12.89	Other viral pneumonia		
J12.9	Viral pneumonia, unspecified		
J13	Pneumonia due to Streptococcus pneumoniae		
J14	Pneumonia due to Hemophilus influenzae		
J15.0	Pneumonia due to Klebsiella pneumoniae		
J15.1	Pneumonia due to Pseudomonas		
J15.20	Pneumonia due to staphylococcus, unspecified		
J15.211	Pneumonia due to Methicillin susceptible Staphylococcus aureus		
J15.212	Pneumonia due to Methicillin resistant Staphylococcus aureus		
J15.29	Pneumonia due to other staphylococcus		
J15.3	Pneumonia due to streptococcus, group B		
J15.4	Pneumonia due to other streptococci		
J15.5	Pneumonia due to Escherichia coli		
J15.61	Pneumonia due to Acinetobacter baumannii		
J15.69	Pneumonia due to other Gram-negative bacteria		

J15.7	Pneumonia due to Mycoplasma pneumoniae		
J15.8	Pneumonia due to other specified bacteria		
J15.9	Unspecified bacterial pneumonia		
J16.0	Chlamydial pneumonia		
J16.8	Pneumonia due to other specified infectious organisms		
J18.0	Bronchopneumonia, unspecified organism		
J18.1	Lobar pneumonia, unspecified organism		
J18.8	Other pneumonia, unspecified organism		
J18.9	Pneumonia, unspecified organism		
J40	Bronchitis, not specified as acute or chronic		
J41.0	Simple chronic bronchitis		
J41.1	Mucopurulent chronic bronchitis		
J41.8	Mixed simple and mucopurulent chronic bronchitis		
J42	Unspecified chronic bronchitis		
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]		
J43.1	Panlobular emphysema		
J43.2	Centrilobular emphysema		
J43.8	Other emphysema		
J43.9	Emphysema, unspecified		
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection		
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation		
J44.81	Bronchiolitis obliterans and bronchiolitis obliterans syndrome		
J44.89	Other specified chronic obstructive pulmonary disease		
J44.9	Chronic obstructive pulmonary disease, unspecified		
J45.20	Mild intermittent asthma, uncomplicated		
J45.21	Mild intermittent asthma with (acute) exacerbation		
J45.22	Mild intermittent asthma with status asthmaticus		
J45.30	Mild persistent asthma, uncomplicated		
J45.31	Mild persistent asthma with (acute) exacerbation		
J45.32	Mild persistent asthma with status asthmaticus		
J45.40	Moderate persistent asthma, uncomplicated		
J45.41	Moderate persistent asthma, uncompleted		
J45.42	Moderate persistent asthma with status asthmaticus		
J45.50	Severe persistent asthma, uncomplicated		
J45.51	Severe persistent asthma with (acute) exacerbation		

ent asthma with status asthmaticus	
thma with (acute) exacerbation	
thma with status asthmaticus	
thma, uncomplicated	
ed bronchospasm	
asthma	
with acute lower respiratory infection	
with (acute) exacerbation	
, uncomplicated	
oneumoconiosis	
is due to asbestos and other mineral fibers	
is due to talc dust	
is due to other dust containing silica	
f lung)	
is (of lung)	
sis (of lung)	
is due to other specified inorganic dusts	
neumoconiosis	
is associated with tuberculosis	
disease	
e due to other specific organic dusts	
<u> </u>	
ung	
ung	
orker's lung	
ripper's lung	
į	ripper's lung er and humidifier lung ity pneumonitis due to other organic dusts Page 25 of 63 percial/NH Medicaid)



J67.9	Hypersensitivity pneumonitis due to unspecified organic dust	
J68.0	Bronchitis and pneumonitis due to chemicals, gases, fumes and vapors	
J68.1	Pulmonary edema due to chemicals, gases, fumes and vapors	
J68.2	Upper respiratory inflammation due to chemicals, gases, fumes and vapors, not elsewhere classified	
J68.3	Other acute and subacute respiratory conditions due to chemicals, gases, fumes and vapors	
J68.4	Chronic respiratory conditions due to chemicals, gases, fumes and vapors	
J68.8	Other respiratory conditions due to chemicals, gases, fumes and vapors	
J68.9	Unspecified respiratory condition due to chemicals, gases, fumes and vapors	
J69.0	Pneumonitis due to inhalation of food and vomit	
J69.1	Pneumonitis due to inhalation of oils and essences	
J69.8	Pneumonitis due to inhalation of other solids and liquids	
J70.0	Acute pulmonary manifestations due to radiation	
J70.1	Chronic and other pulmonary manifestations due to radiation	
J70.2	Acute drug-induced interstitial lung disorders	
J70.3	Chronic drug-induced interstitial lung disorders	
J70.4	Drug-induced interstitial lung disorders, unspecified	
J70.5	Respiratory conditions due to smoke inhalation	
J70.8	Respiratory conditions due to other specified external agents	
J70.9	Respiratory conditions due to unspecified external agent	
Q33.4	Congenital bronchiectasis	
T86.00	Unspecified complication of bone marrow transplant	
T86.01	Bone marrow transplant rejection	
T86.02	Bone marrow transplant failure	
T86.03	Bone marrow transplant infection	
T86.09	Other complications of bone marrow transplant	
T86.10	Unspecified complication of kidney transplant	
T86.11	Kidney transplant rejection	
T86.12	Kidney transplant failure	
T86.13	Kidney transplant infection	
T86.19	Other complication of kidney transplant	
T86.20	Unspecified complication of heart transplant	
T86.21	Heart transplant rejection	
T86.22	Heart transplant failure	
T86.23	Heart transplant infection	

T86.290	Cardiac allograft vasculopathy	
T86.298	Other complications of heart transplant	
T86.30	Unspecified complication of heart-lung transplant	
T86.31	Heart-lung transplant rejection	
T86.32	Heart-lung transplant failure	
T86.33	Heart-lung transplant infection	
T86.39	Other complications of heart-lung transplant	
T86.40	Unspecified complication of liver transplant	
T86.41	Liver transplant rejection	
T86.42	Liver transplant failure	
T86.43	Liver transplant infection	
T86.49	Other complications of liver transplant	
T86.5	Complications of stem cell transplant	
T86.810	Lung transplant rejection	
T86.811	Lung transplant failure	
T86.812	Lung transplant infection	
T86.818	Other complications of lung transplant	
T86.819	Unspecified complication of lung transplant	
T86.830	Bone graft rejection	
T86.831	Bone graft failure	
T86.832	Bone graft infection	
T86.838	Other complications of bone graft	
T86.839	Unspecified complication of bone graft	
T86.850	Intestine transplant rejection	
T86.851	Intestine transplant failure	
T86.852	Intestine transplant infection	
T86.858	Other complications of intestine transplant	
T86.859	Unspecified complication of intestine transplant	
T86.890	Other transplanted tissue rejection	
T86.891	Other transplanted tissue failure	
T86.892	Other transplanted tissue infection	
T86.898	Other complications of other transplanted tissue	
T86.899	Unspecified complication of other transplanted tissue	
T86.90	Unspecified complication of unspecified transplanted of	organ and tissue
T86.91	Unspecified transplanted organ and tissue rejection	
T86.92	Unspecified transplanted organ and tissue failure	
DMEPOS Standar	d Medical Policy Page 27 of 63	Confidential and Proprietary



T86.93	Unspecified transplanted organ and tissue infection
T86.99	Other complications of unspecified transplanted organ and tissue
U07.1	COVID-19
U09.9	Post COVID-19 condition, unspecified

### Group 4 Paragraph: For HCPCS codes A7006, J2545:

### Group 4 Codes:

ICD-10 Code	Description
B20	Human immunodeficiency virus [HIV] disease
B59	Pneumocystosis
T86.00	Unspecified complication of bone marrow transplant
T86.01	Bone marrow transplant rejection
T86.02	Bone marrow transplant failure
T86.03	Bone marrow transplant infection
T86.09	Other complications of bone marrow transplant
T86.10	Unspecified complication of kidney transplant
T86.11	Kidney transplant rejection
T86.12	Kidney transplant failure
T86.13	Kidney transplant infection
T86.19	Other complication of kidney transplant
T86.20	Unspecified complication of heart transplant
T86.21	Heart transplant rejection
T86.22	Heart transplant failure
T86.23	Heart transplant infection
T86.290	Cardiac allograft vasculopathy
T86.298	Other complications of heart transplant
T86.30	Unspecified complication of heart-lung transplant
T86.31	Heart-lung transplant rejection
T86.32	Heart-lung transplant failure
T86.33	Heart-lung transplant infection
T86.39	Other complications of heart-lung transplant
T86.40	Unspecified complication of liver transplant
T86.41	Liver transplant rejection
T86.42	Liver transplant failure

# Nebulizers/Compressors

T86.43	Liver transplant infection
T86.49	
	Other complications of liver transplant
T86.5	Complications of stem cell transplant
T86.810	Lung transplant rejection
T86.811	Lung transplant failure
T86.812	Lung transplant infection
T86.818	Other complications of lung transplant
T86.819	Unspecified complication of lung transplant
T86.830	Bone graft rejection
T86.831	Bone graft failure
T86.832	Bone graft infection
T86.838	Other complications of bone graft
T86.839	Unspecified complication of bone graft
T86.850	Intestine transplant rejection
T86.851	Intestine transplant failure
T86.852	Intestine transplant infection
T86.858	Other complications of intestine transplant
T86.859	Unspecified complication of intestine transplant
T86.890	Other transplanted tissue rejection
T86.891	Other transplanted tissue failure
T86.892	Other transplanted tissue infection
T86.898	Other complications of other transplanted tissue
T86.899	Unspecified complication of other transplanted tissue
T86.90	Unspecified complication of unspecified transplanted organ and tissue
T86.91	Unspecified transplanted organ and tissue rejection
T86.92	Unspecified transplanted organ and tissue failure
T86.93	Unspecified transplanted organ and tissue infection
T86.99	Other complications of unspecified transplanted organ and tissue

Group 5 Paragraph: For HCPCS codes A4217, A7007, A7010, A7011, A7012, A7017, A7018, E0585, E1372:

### Group 5 Codes:

ICD-10 Code	Description	
A15.0	Tuberculosis of lung	
E84.0	Cystic fibrosis with pulmonary manifestations	
DMEPOS Standard Nebulizers/Compre	Medical Policy Page 29 of 63 ssors (Medicare/Commercial/NH Medicaid)	Confidential and Proprietary



J39.8	Other specified diseases of upper respiratory tract
J47.0	Bronchiectasis with acute lower respiratory infection
J47.1	Bronchiectasis with (acute) exacerbation
J47.9	Bronchiectasis, uncomplicated
J98.09	Other diseases of bronchus, not elsewhere classified
Q33.4	Congenital bronchiectasis
Z43.0	Encounter for attention to tracheostomy
Z93.0	Tracheostomy status

### Group 6 Paragraph: For HCPCS code A4216:

### Group 6 Codes:

ICD-10 Code	Description
B20	Human immunodeficiency virus [HIV] disease
B59	Pneumocystosis
J41.0	Simple chronic bronchitis
J41.1	Mucopurulent chronic bronchitis
J41.8	Mixed simple and mucopurulent chronic bronchitis
J42	Unspecified chronic bronchitis
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]
J43.1	Panlobular emphysema
J43.2	Centrilobular emphysema
J43.8	Other emphysema
J43.9	Emphysema, unspecified
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation
J44.81	Bronchiolitis obliterans and bronchiolitis obliterans syndrome
J44.89	Other specified chronic obstructive pulmonary disease
J44.9	Chronic obstructive pulmonary disease, unspecified
J45.20	Mild intermittent asthma, uncomplicated
J45.21	Mild intermittent asthma with (acute) exacerbation
J45.22	Mild intermittent asthma with status asthmaticus
J45.30	Mild persistent asthma, uncomplicated
J45.31	Mild persistent asthma with (acute) exacerbation
J45.32	Mild persistent asthma with status asthmaticus
DMEPOS Standar	d Medical Policy Page 30 of 63 Confidential and Proprietary

Nebulizers/Compressors (Medicare/Commercial/NH Medicaid)

J45.40	Moderate persistent asthma, uncomplicated	
J45.41	Moderate persistent asthma with (acute) exacerbation	
J45.42	Moderate persistent asthma with status asthmaticus	
J45.50	Severe persistent asthma, uncomplicated	
J45.51	Severe persistent asthma with (acute) exacerbation	
J45.52	Severe persistent asthma with status asthmaticus	
J45.901	Unspecified asthma with (acute) exacerbation	
J45.902	Unspecified asthma with status asthmaticus	
J45.909	Unspecified asthma, uncomplicated	
J45.990	Exercise induced bronchospasm	
J45.991	Cough variant asthma	
J45.998	Other asthma	
J47.0	Bronchiectasis with acute lower respiratory infection	
J47.1	Bronchiectasis with (acute) exacerbation	
J47.9	Bronchiectasis, uncomplicated	
J60	Coalworker's pneumoconiosis	
J61	Pneumoconiosis due to asbestos and other mineral fibers	
J62.0	Pneumoconiosis due to talc dust	
J62.8	Pneumoconiosis due to other dust containing silica	
J63.0	Aluminosis (of lung)	
J63.1	Bauxite fibrosis (of lung)	
J63.2	Berylliosis	
J63.3	Graphite fibrosis (of lung)	
J63.4	Siderosis	
J63.5	Stannosis	
J63.6	Pneumoconiosis due to other specified inorganic dusts	
J64	Unspecified pneumoconiosis	
J65	Pneumoconiosis associated with tuberculosis	
J66.0	Byssinosis	
J66.1	Flax-dressers' disease	
J66.2	Cannabinosis	
J66.8	Airway disease due to other specific organic dusts	
J67.0	Farmer's lung	
J67.1	Bagassosis	
J67.2	Bird fancier's lung	
J67.3	Suberosis	
DMEPOS Stand	ard Medical Policy Page 31 of 63 Confidential and Proprietary	

J67.4	Maltworker's lung	
J67.5	Mushroom-worker's lung	
J67.6	Maple-bark-stripper's lung	
J67.7	Air conditioner and humidifier lung	
J67.8	Hypersensitivity pneumonitis due to other organic dusts	
J67.9	Hypersensitivity pneumonitis due to unspecified organic dust	
J68.0	Bronchitis and pneumonitis due to chemicals, gases, fumes and vapors	
J68.1	Pulmonary edema due to chemicals, gases, fumes and vapors	
J68.2	Upper respiratory inflammation due to chemicals, gases, fumes and vapors, not elsewhere classified	
J68.3	Other acute and subacute respiratory conditions due to chemicals, gases, fumes and vapors	
J68.4	Chronic respiratory conditions due to chemicals, gases, fumes and vapors	
J68.8	Other respiratory conditions due to chemicals, gases, fumes and vapors	
J68.9	Unspecified respiratory condition due to chemicals, gases, fumes and vapors	
J69.0	Pneumonitis due to inhalation of food and vomit	
J69.1	Pneumonitis due to inhalation of oils and essences	
J69.8	Pneumonitis due to inhalation of other solids and liquids	
J70.0	Acute pulmonary manifestations due to radiation	
J70.1	Chronic and other pulmonary manifestations due to radiation	
J70.2	Acute drug-induced interstitial lung disorders	
J70.3	Chronic drug-induced interstitial lung disorders	
J70.4	Drug-induced interstitial lung disorders, unspecified	
J70.5	Respiratory conditions due to smoke inhalation	
J70.8	Respiratory conditions due to other specified external agents	
J70.9	Respiratory conditions due to unspecified external agent	
T86.00	Unspecified complication of bone marrow transplant	
T86.01	Bone marrow transplant rejection	
T86.02	Bone marrow transplant failure	
T86.03	Bone marrow transplant infection	
T86.09	Other complications of bone marrow transplant	
T86.10	Unspecified complication of kidney transplant	
T86.11	Kidney transplant rejection	
T86.12	Kidney transplant failure	
T86.13	Kidney transplant infection	
T86.19	Other complication of kidney transplant	

# Northwood

# Nebulizers/Compressors

T86.20	Unspecified complication of heart transplant	
T86.21	Heart transplant rejection	
T86.22	Heart transplant failure	
T86.23	Heart transplant infection	
T86.290	Cardiac allograft vasculopathy	
T86.298	Other complications of heart transplant	
T86.30	Unspecified complication of heart-lung transplant	
T86.31	Heart-lung transplant rejection	
T86.32	Heart-lung transplant failure	
T86.33	Heart-lung transplant infection	
T86.39	Other complications of heart-lung transplant	
T86.40	Unspecified complication of liver transplant	
T86.41	Liver transplant rejection	
T86.42	Liver transplant failure	
T86.43	Liver transplant infection	
T86.49	Other complications of liver transplant	
T86.5	Complications of stem cell transplant	
T86.810	Lung transplant rejection	
T86.811	Lung transplant failure	
T86.812	Lung transplant infection	
T86.818	Other complications of lung transplant	
T86.819	Unspecified complication of lung transplant	
T86.830	Bone graft rejection	
T86.831	Bone graft failure	
T86.832	Bone graft infection	
T86.838	Other complications of bone graft	
T86.839	Unspecified complication of bone graft	
T86.850	Intestine transplant rejection	
T86.851	Intestine transplant failure	
T86.852	Intestine transplant infection	
T86.858	Other complications of intestine transplant	
T86.859	Unspecified complication of intestine transplant	
T86.890	Other transplanted tissue rejection	
T86.891	Other transplanted tissue failure	
T86.892	Other transplanted tissue infection	
T86.898	Other complications of other transplanted tissue	
	ard Medical Policy Page 33 of 63	Confidential and Proprietary

Nebulizers/Compressors (Medicare/Commercial/NH Medicaid)



T86.899	Unspecified complication of other transplanted tissue
T86.90	Unspecified complication of unspecified transplanted organ and tissue
T86.91	Unspecified transplanted organ and tissue rejection
T86.92	Unspecified transplanted organ and tissue failure
T86.93	Unspecified transplanted organ and tissue infection
T86.99	Other complications of unspecified transplanted organ and tissue

### Group 7 Paragraph: For HCPCS codes J7608:

### Group 7 Codes:

ICD-10 Code	Description
A22.1	Pulmonary anthrax
A37.01	Whooping cough due to Bordetella pertussis with pneumonia
A37.11	Whooping cough due to Bordetella parapertussis with pneumonia
A37.81	Whooping cough due to other Bordetella species with pneumonia
A37.91	Whooping cough, unspecified species with pneumonia
A48.1	Legionnaires' disease
B25.0	Cytomegaloviral pneumonitis
B44.0	Invasive pulmonary aspergillosis
B77.81	Ascariasis pneumonia
J09.X1	Influenza due to identified novel influenza A virus with pneumonia
J09.X2	Influenza due to identified novel influenza A virus with other respiratory manifestations
J09.X3	Influenza due to identified novel influenza A virus with gastrointestinal manifestations
J09.X9	Influenza due to identified novel influenza A virus with other manifestations
J10.00	Influenza due to other identified influenza virus with unspecified type of pneumonia
J10.01	Influenza due to other identified influenza virus with the same other identified influenza virus pneumonia
J10.08	Influenza due to other identified influenza virus with other specified pneumonia
J10.1	Influenza due to other identified influenza virus with other respiratory manifestations
J10.2	Influenza due to other identified influenza virus with gastrointestinal manifestations



J10.81	Influenza due to other identified influenza virus with encephalopathy
J10.82	Influenza due to other identified influenza virus with myocarditis
J10.83	Influenza due to other identified influenza virus with otitis media
J10.89	Influenza due to other identified influenza virus with other manifestations
J11.00	Influenza due to unidentified influenza virus with unspecified type of pneumonia
J11.08	Influenza due to unidentified influenza virus with specified pneumonia
J11.1	Influenza due to unidentified influenza virus with other respiratory manifestations
J11.2	Influenza due to unidentified influenza virus with gastrointestinal manifestations
J11.81	Influenza due to unidentified influenza virus with encephalopathy
J11.82	Influenza due to unidentified influenza virus with myocarditis
J11.83	Influenza due to unidentified influenza virus with otitis media
J11.89	Influenza due to unidentified influenza virus with other manifestations
J12.0	Adenoviral pneumonia
J12.1	Respiratory syncytial virus pneumonia
J12.2	Parainfluenza virus pneumonia
J12.3	Human metapneumovirus pneumonia
J12.81	Pneumonia due to SARS-associated coronavirus
J12.89	Other viral pneumonia
J12.9	Viral pneumonia, unspecified
J13	Pneumonia due to Streptococcus pneumoniae
J14	Pneumonia due to Hemophilus influenzae
J15.0	Pneumonia due to Klebsiella pneumoniae
J15.1	Pneumonia due to Pseudomonas
J15.20	Pneumonia due to staphylococcus, unspecified
J15.211	Pneumonia due to Methicillin susceptible Staphylococcus aureus
J15.212	Pneumonia due to Methicillin resistant Staphylococcus aureus
J15.29	Pneumonia due to other staphylococcus
J15.3	Pneumonia due to streptococcus, group B
J15.4	Pneumonia due to other streptococci
J15.5	Pneumonia due to Escherichia coli
J15.61	Pneumonia due to Acinetobacter baumannii
J15.69	Pneumonia due to other Gram-negative bacteria
J15.7	Pneumonia due to Mycoplasma pneumoniae

# Northwood

J15.8	Pneumonia due to other specified bacteria
J15.9	Unspecified bacterial pneumonia
J16.0	Chlamydial pneumonia
J16.8	Pneumonia due to other specified infectious organisms
J18.0	Bronchopneumonia, unspecified organism
J18.1	Lobar pneumonia, unspecified organism
J18.8	Other pneumonia, unspecified organism
J18.9	Pneumonia, unspecified organism
J40	Bronchitis, not specified as acute or chronic
J41.0	Simple chronic bronchitis
J41.1	Mucopurulent chronic bronchitis
J41.8	Mixed simple and mucopurulent chronic bronchitis
J42	Unspecified chronic bronchitis
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]
J43.1	Panlobular emphysema
J43.2	Centrilobular emphysema
J43.8	Other emphysema
J43.9	Emphysema, unspecified
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation
J44.81	Bronchiolitis obliterans and bronchiolitis obliterans syndrome
J44.89	Other specified chronic obstructive pulmonary disease
J44.9	Chronic obstructive pulmonary disease, unspecified
J45.20	Mild intermittent asthma, uncomplicated
J45.21	Mild intermittent asthma with (acute) exacerbation
J45.22	Mild intermittent asthma with status asthmaticus
J45.30	Mild persistent asthma, uncomplicated
J45.31	Mild persistent asthma with (acute) exacerbation
J45.32	Mild persistent asthma with status asthmaticus
J45.40	Moderate persistent asthma, uncomplicated
J45.41	Moderate persistent asthma with (acute) exacerbation
J45.42	Moderate persistent asthma with status asthmaticus
J45.50	Severe persistent asthma, uncomplicated
J45.51	Severe persistent asthma with (acute) exacerbation
J45.52	Severe persistent asthma with status asthmaticus

### **Medical Policy** Northwood

### Nebulizers/Compressors

J45.901	Unspecified asthma with (acute) exacerbation
J45.902	Unspecified asthma with status asthmaticus
J45.909	Unspecified asthma, uncomplicated
J45.990	Exercise induced bronchospasm
J45.991	Cough variant asthma
J45.998	Other asthma
J47.0	Bronchiectasis with acute lower respiratory infection
J47.1	Bronchiectasis with (acute) exacerbation
J47.9	Bronchiectasis, uncomplicated
J60	Coalworker's pneumoconiosis
J61	Pneumoconiosis due to asbestos and other mineral fibers
J62.0	Pneumoconiosis due to talc dust
J62.8	Pneumoconiosis due to other dust containing silica
J63.0	Aluminosis (of lung)
J63.1	Bauxite fibrosis (of lung)
J63.2	Berylliosis
J63.3	Graphite fibrosis (of lung)
J63.4	Siderosis
J63.5	Stannosis
J63.6	Pneumoconiosis due to other specified inorganic dusts
J64	Unspecified pneumoconiosis
J65	Pneumoconiosis associated with tuberculosis
J66.0	Byssinosis
J66.1	Flax-dressers' disease
J66.2	Cannabinosis
J66.8	Airway disease due to other specific organic dusts
J67.0	Farmer's lung
J67.1	Bagassosis
J67.2	Bird fancier's lung
J67.3	Suberosis
J67.4	Maltworker's lung
J67.5	Mushroom-worker's lung
J67.6	Maple-bark-stripper's lung
J67.7	Air conditioner and humidifier lung
J67.8	Hypersensitivity pneumonitis due to other organic dusts
J67.9	Hypersensitivity pneumonitis due to unspecified organic dust
DMEPOS Stand	lard Medical Policy Page 37 of 63 Confidential and Proprietary

Nebulizers/Compressors (Medicare/Commercial/NH Medicaid)

### Nebulizers/Compressors

Bronchitis and pneumonitis due to chemicals, gases, fumes and vapors
Pulmonary edema due to chemicals, gases, fumes and vapors
Upper respiratory inflammation due to chemicals, gases, fumes and vapors, not elsewhere classified
Other acute and subacute respiratory conditions due to chemicals, gases, fumes and vapors
Chronic respiratory conditions due to chemicals, gases, fumes and vapors
Other respiratory conditions due to chemicals, gases, fumes and vapors
Unspecified respiratory condition due to chemicals, gases, fumes and vapors
Pneumonitis due to inhalation of food and vomit
Pneumonitis due to inhalation of oils and essences
Pneumonitis due to inhalation of other solids and liquids
Acute pulmonary manifestations due to radiation
Chronic and other pulmonary manifestations due to radiation
Acute drug-induced interstitial lung disorders
Chronic drug-induced interstitial lung disorders
Drug-induced interstitial lung disorders, unspecified
Respiratory conditions due to smoke inhalation
Respiratory conditions due to other specified external agents
Respiratory conditions due to unspecified external agent

Group 8 Paragraph: For HCPCS codes J7605, J7606, J7611, J7612, J7613, J7614, J7620, J7626, J7631, J7644, J7669:

### **Group 8 Codes:**

ICD-10 Code	Description
J12.82	Pneumonia due to coronavirus disease 2019
J41.0	Simple chronic bronchitis
J41.1	Mucopurulent chronic bronchitis
J41.8	Mixed simple and mucopurulent chronic bronchitis
J42	Unspecified chronic bronchitis
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]
J43.1	Panlobular emphysema
J43.2	Centrilobular emphysema
J43.8	Other emphysema
J43.9	Emphysema, unspecified

Confidential and Proprietary



J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation
J44.81	Bronchiolitis obliterans and bronchiolitis obliterans syndrome
J44.89	Other specified chronic obstructive pulmonary disease
J44.9	Chronic obstructive pulmonary disease, unspecified
J45.20	Mild intermittent asthma, uncomplicated
J45.21	Mild intermittent asthma with (acute) exacerbation
J45.22	Mild intermittent asthma with status asthmaticus
J45.30	Mild persistent asthma, uncomplicated
J45.31	Mild persistent asthma with (acute) exacerbation
J45.32	Mild persistent asthma with status asthmaticus
J45.40	Moderate persistent asthma, uncomplicated
J45.41	Moderate persistent asthma with (acute) exacerbation
J45.42	Moderate persistent asthma with status asthmaticus
J45.50	Severe persistent asthma, uncomplicated
J45.51	Severe persistent asthma with (acute) exacerbation
J45.52	Severe persistent asthma with status asthmaticus
J45.901	Unspecified asthma with (acute) exacerbation
J45.902	Unspecified asthma with status asthmaticus
J45.909	Unspecified asthma, uncomplicated
J45.990	Exercise induced bronchospasm
J45.991	Cough variant asthma
J45.998	Other asthma
J47.0	Bronchiectasis with acute lower respiratory infection
J47.1	Bronchiectasis with (acute) exacerbation
J47.9	Bronchiectasis, uncomplicated
J60	Coalworker's pneumoconiosis
J61	Pneumoconiosis due to asbestos and other mineral fibers
J62.0	Pneumoconiosis due to talc dust
J62.8	Pneumoconiosis due to other dust containing silica
J63.0	Aluminosis (of lung)
J63.1	Bauxite fibrosis (of lung)
J63.2	Berylliosis
J63.3	Graphite fibrosis (of lung)
J63.4	Siderosis

Confidential and Proprietary



J63.5	Stannosis
J63.6	Pneumoconiosis due to other specified inorganic dusts
J64	Unspecified pneumoconiosis
J65	Pneumoconiosis associated with tuberculosis
J66.0	Byssinosis
J66.1	Flax-dressers' disease
J66.2	Cannabinosis
J66.8	Airway disease due to other specific organic dusts
J67.0	Farmer's lung
J67.1	Bagassosis
J67.2	Bird fancier's lung
J67.3	Suberosis
J67.4	Maltworker's lung
J67.5	Mushroom-worker's lung
J67.6	Maple-bark-stripper's lung
J67.7	Air conditioner and humidifier lung
J67.8	Hypersensitivity pneumonitis due to other organic dusts
J67.9	Hypersensitivity pneumonitis due to unspecified organic dust
J68.0	Bronchitis and pneumonitis due to chemicals, gases, fumes and vapors
J68.1	Pulmonary edema due to chemicals, gases, fumes and vapors
J68.2	Upper respiratory inflammation due to chemicals, gases, fumes and vapors, not elsewhere classified
J68.3	Other acute and subacute respiratory conditions due to chemicals, gases, fumes and vapors
J68.4	Chronic respiratory conditions due to chemicals, gases, fumes and vapors
J68.8	Other respiratory conditions due to chemicals, gases, fumes and vapors
J68.9	Unspecified respiratory condition due to chemicals, gases, fumes and vapors
J69.0	Pneumonitis due to inhalation of food and vomit
J69.1	Pneumonitis due to inhalation of oils and essences
J69.8	Pneumonitis due to inhalation of other solids and liquids
J70.0	Acute pulmonary manifestations due to radiation
J70.1	Chronic and other pulmonary manifestations due to radiation
J70.2	Acute drug-induced interstitial lung disorders
J70.3	Chronic drug-induced interstitial lung disorders
J70.4	Drug-induced interstitial lung disorders, unspecified
J70.5	Respiratory conditions due to smoke inhalation



J70.8	Respiratory conditions due to other specified external agents	
J70.9	Respiratory conditions due to unspecified external agent	
U07.1	COVID-19	
U09.9	Post COVID-19 condition, unspecified	

### Group 9 Paragraph: For HCPCS code J7639:

### **Group 9 Codes:**

ICD-10 Code	Description
E84.0	Cystic fibrosis with pulmonary manifestations

### Group 10 Paragraph: For HCPCS code J7682:

### Group 10 Codes:

ICD-10 Code	Description
A15.0	Tuberculosis of lung
E84.0	Cystic fibrosis with pulmonary manifestations
J47.0	Bronchiectasis with acute lower respiratory infection
J47.1	Bronchiectasis with (acute) exacerbation
J47.9	Bronchiectasis, uncomplicated
Q33.4	Congenital bronchiectasis

### Group 11 Paragraph: For HCPCS codes A7016, E0574, J7686

### Group 11 Codes:

ICD-10 Code	Description
I27.0	Primary pulmonary hypertension
I27.20	Pulmonary hypertension, unspecified
I27.21	Secondary pulmonary arterial hypertension
I27.83	Eisenmenger's syndrome
I27.89	Other specified pulmonary heart diseases

### Group 12 Paragraph: For HCPCS code A7005:

### Group 12 Codes:



ICD-10 Code	Description
A15.0	Tuberculosis of lung
A22.1	Pulmonary anthrax
A37.01	Whooping cough due to Bordetella pertussis with pneumonia
A37.11	Whooping cough due to Bordetella parapertussis with pneumonia
A37.81	Whooping cough due to other Bordetella species with pneumonia
A37.91	Whooping cough, unspecified species with pneumonia
A48.1	Legionnaires' disease
B20	Human immunodeficiency virus [HIV] disease
B25.0	Cytomegaloviral pneumonitis
B44.0	Invasive pulmonary aspergillosis
B59	Pneumocystosis
B77.81	Ascariasis pneumonia
E84.0	Cystic fibrosis with pulmonary manifestations
I27.0	Primary pulmonary hypertension
I27.20	Pulmonary hypertension, unspecified
I27.21	Secondary pulmonary arterial hypertension
I27.23	Pulmonary hypertension due to lung diseases and hypoxia
I27.24	Chronic thromboembolic pulmonary hypertension
I27.29	Other secondary pulmonary hypertension
I27.83	Eisenmenger's syndrome
I27.89	Other specified pulmonary heart diseases
J09.X1	Influenza due to identified novel influenza A virus with pneumonia
J09.X2	Influenza due to identified novel influenza A virus with other respiratory manifestations
J09.X3	Influenza due to identified novel influenza A virus with gastrointestinal manifestations
J09.X9	Influenza due to identified novel influenza A virus with other manifestations
J10.00	Influenza due to other identified influenza virus with unspecified type of pneumonia
J10.01	Influenza due to other identified influenza virus with the same other identified influenza virus pneumonia
J10.08	Influenza due to other identified influenza virus with other specified pneumonia
J10.1	Influenza due to other identified influenza virus with other respiratory



J10.2 ma J10.81 Inf	Iuenza due to other identified influenza virus with gastrointestinal         inifestations         Iuenza due to other identified influenza virus with encephalopathy         Iuenza due to other identified influenza virus with myocarditis
J10.82 Inf	luenza due to other identified influenza virus with myocarditis
010.0 <b>2</b> IIII	
J10.83 Inf	luenza due to other identified influenza virus with otitis media
J10.89 Inf	luenza due to other identified influenza virus with other manifestations
	luenza due to unidentified influenza virus with unspecified type of eumonia
J11.08 Inf	luenza due to unidentified influenza virus with specified pneumonia
	luenza due to unidentified influenza virus with other respiratory nifestations
	luenza due to unidentified influenza virus with gastrointestinal nifestations
J11.81 Inf	luenza due to unidentified influenza virus with encephalopathy
J11.82 Inf	luenza due to unidentified influenza virus with myocarditis
J11.83 Inf	luenza due to unidentified influenza virus with otitis media
J11.89 Inf	luenza due to unidentified influenza virus with other manifestations
J12.0 Ad	enoviral pneumonia
J12.1 Re	spiratory syncytial virus pneumonia
J12.2 Par	rainfluenza virus pneumonia
J12.3 Hu	man metapneumovirus pneumonia
J12.81 Pno	eumonia due to SARS-associated coronavirus
J12.82 Pne	eumonia due to coronavirus disease 2019
	her viral pneumonia
J12.9 Vii	ral pneumonia, unspecified
J13 Pno	eumonia due to Streptococcus pneumoniae
J14 Pno	eumonia due to Hemophilus influenzae
J15.0 Pno	eumonia due to Klebsiella pneumoniae
J15.1 Pne	eumonia due to Pseudomonas
J15.20 Pne	eumonia due to staphylococcus, unspecified
	eumonia due to Methicillin susceptible Staphylococcus aureus
	eumonia due to Methicillin resistant Staphylococcus aureus
J15.29 Pno	eumonia due to other staphylococcus
J15.3 Pne	eumonia due to streptococcus, group B
J15.4 Pno	eumonia due to other streptococci

J15.5	Pneumonia due to Escherichia coli
J15.61	Pneumonia due to Acinetobacter baumannii
J15.69	Pneumonia due to other Gram-negative bacteria
J15.7	Pneumonia due to Mycoplasma pneumoniae
J15.8	Pneumonia due to other specified bacteria
J15.9	Unspecified bacterial pneumonia
J16.0	Chlamydial pneumonia
J16.8	Pneumonia due to other specified infectious organisms
J18.0	Bronchopneumonia, unspecified organism
J18.1	Lobar pneumonia, unspecified organism
J18.8	Other pneumonia, unspecified organism
J18.9	Pneumonia, unspecified organism
J40	Bronchitis, not specified as acute or chronic
J41.0	Simple chronic bronchitis
J41.1	Mucopurulent chronic bronchitis
J41.8	Mixed simple and mucopurulent chronic bronchitis
J42	Unspecified chronic bronchitis
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]
J43.1	Panlobular emphysema
J43.2	Centrilobular emphysema
J43.8	Other emphysema
J43.9	Emphysema, unspecified
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation
J44.81	Bronchiolitis obliterans and bronchiolitis obliterans syndrome
J44.89	Other specified chronic obstructive pulmonary disease
J44.9	Chronic obstructive pulmonary disease, unspecified
J45.20	Mild intermittent asthma, uncomplicated
J45.21	Mild intermittent asthma with (acute) exacerbation
J45.22	Mild intermittent asthma with status asthmaticus
J45.30	Mild persistent asthma, uncomplicated
J45.31	Mild persistent asthma with (acute) exacerbation
J45.32	Mild persistent asthma with status asthmaticus
J45.40	Moderate persistent asthma, uncomplicated
J45.41	Moderate persistent asthma with (acute) exacerbation

### Nebulizers/Compressors

J45.42	Moderate persistent asthma with status asthmaticus	
J45.50	Severe persistent asthma, uncomplicated	
J45.51	Severe persistent asthma with (acute) exacerbation	
J45.52	Severe persistent asthma with status asthmaticus	
J45.901	Unspecified asthma with (acute) exacerbation	
J45.902	Unspecified asthma with status asthmaticus	
J45.909	Unspecified asthma, uncomplicated	
J45.990	Exercise induced bronchospasm	
J45.991	Cough variant asthma	
J45.998	Other asthma	
J47.0	Bronchiectasis with acute lower respiratory infection	
J47.1	Bronchiectasis with (acute) exacerbation	
J47.9	Bronchiectasis, uncomplicated	
J60	Coalworker's pneumoconiosis	
J61	Pneumoconiosis due to asbestos and other mineral fibers	
J62.0	Pneumoconiosis due to talc dust	
J62.8	Pneumoconiosis due to other dust containing silica	
J63.0	Aluminosis (of lung)	
J63.1	Bauxite fibrosis (of lung)	
J63.2	Berylliosis	
J63.3	Graphite fibrosis (of lung)	
J63.4	Siderosis	
J63.5	Stannosis	
J63.6	Pneumoconiosis due to other specified inorganic dusts	
J64	Unspecified pneumoconiosis	
J65	Pneumoconiosis associated with tuberculosis	
J66.0	Byssinosis	
J66.1	Flax-dressers' disease	
J66.2	Cannabinosis	
J66.8	Airway disease due to other specific organic dusts	
J67.0	Farmer's lung	
J67.1	Bagassosis	
J67.2	Bird fancier's lung	
J67.3	Suberosis	
J67.4	Maltworker's lung	
J67.5	Mushroom-worker's lung	
DMEPOS Stand	ard Medical Policy Page 45 of 63 Confidential and Proprietary	



J67.6	Maple-bark-stripper's lung	
J67.7	Air conditioner and humidifier lung	
J67.8	Hypersensitivity pneumonitis due to other organic dusts	
J67.9	Hypersensitivity pneumonitis due to unspecified organic dust	
J68.0	Bronchitis and pneumonitis due to chemicals, gases, fumes and vapors	
J68.1	Pulmonary edema due to chemicals, gases, fumes and vapors	
J68.2	Upper respiratory inflammation due to chemicals, gases, fumes and vapors, not elsewhere classified	
J68.3	Other acute and subacute respiratory conditions due to chemicals, gases, fumes and vapors	
J68.4	Chronic respiratory conditions due to chemicals, gases, fumes and vapors	
J68.8	Other respiratory conditions due to chemicals, gases, fumes and vapors	
J68.9	Unspecified respiratory condition due to chemicals, gases, fumes and vapors	
J69.0	Pneumonitis due to inhalation of food and vomit	
J69.1	Pneumonitis due to inhalation of oils and essences	
J69.8	Pneumonitis due to inhalation of other solids and liquids	
J70.0	Acute pulmonary manifestations due to radiation	
J70.1	Chronic and other pulmonary manifestations due to radiation	
J70.2	Acute drug-induced interstitial lung disorders	
J70.3	Chronic drug-induced interstitial lung disorders	
J70.4	Drug-induced interstitial lung disorders, unspecified	
J70.5	Respiratory conditions due to smoke inhalation	
J70.8	Respiratory conditions due to other specified external agents	
J70.9	Respiratory conditions due to unspecified external agent	
Q33.4	Congenital bronchiectasis	
T86.00	Unspecified complication of bone marrow transplant	
T86.01	Bone marrow transplant rejection	
T86.02	Bone marrow transplant failure	
T86.03	Bone marrow transplant infection	
T86.09	Other complications of bone marrow transplant	
T86.10	Unspecified complication of kidney transplant	
T86.11	Kidney transplant rejection	
T86.12	Kidney transplant failure	
T86.13	Kidney transplant infection	
T86.19	Other complication of kidney transplant	
T86.20	Unspecified complication of heart transplant	

### **Medical Policy** Northwood

### Nebulizers/Compressors

T86.21	Heart transplant rejection	
T86.22	Heart transplant failure	
T86.23	Heart transplant infection	
T86.290	Cardiac allograft vasculopathy	
T86.298	Other complications of heart transplant	
T86.30	Unspecified complication of heart-lung transplant	
T86.31	Heart-lung transplant rejection	
T86.32	Heart-lung transplant failure	
T86.33	Heart-lung transplant infection	
T86.39	Other complications of heart-lung transplant	
T86.40	Unspecified complication of liver transplant	
T86.41	Liver transplant rejection	
T86.42	Liver transplant failure	
T86.43	Liver transplant infection	
T86.49	Other complications of liver transplant	
T86.5	Complications of stem cell transplant	
T86.810	Lung transplant rejection	
T86.811	Lung transplant failure	
T86.812	Lung transplant infection	
T86.818	Other complications of lung transplant	
T86.819	Unspecified complication of lung transplant	
T86.830	Bone graft rejection	
T86.831	Bone graft failure	
T86.832	Bone graft infection	
T86.838	Other complications of bone graft	
T86.839	Unspecified complication of bone graft	
T86.850	Intestine transplant rejection	
T86.851	Intestine transplant failure	
T86.852	Intestine transplant infection	
T86.858	Other complications of intestine transplant	
T86.859	Unspecified complication of intestine transplant	
T86.890	Other transplanted tissue rejection	
T86.891	Other transplanted tissue failure	
T86.892	Other transplanted tissue infection	
T86.898	Other complications of other transplanted tissue	
T86.899	Unspecified complication of other transplanted tissue	
	rd Medical Policy Page 47 of 63	Confidential and Proprietary

Nebulizers/Compressors (Medicare/Commercial/NH Medicaid)



T86.90	Unspecified complication of unspecified transplanted organ and tissue	
T86.91	Unspecified transplanted organ and tissue rejection	
T86.92	Unspecified transplanted organ and tissue failure	
T86.93	Unspecified transplanted organ and tissue infection	
T86.99	Other complications of unspecified transplanted organ and tissue	
U07.1	COVID-19	
U09.9	Post COVID-19 condition, unspecified	

### Group 13 Paragraph: For HCPCS codes A7013, A7014:

### Group 13 Codes:

ICD-10 Code	Description	
A15.0	Tuberculosis of lung	
A22.1	Pulmonary anthrax	
A37.01	Whooping cough due to Bordetella pertussis with pneumonia	
A37.11	Whooping cough due to Bordetella parapertussis with pneumonia	
A37.81	Whooping cough due to other Bordetella species with pneumonia	
A37.91	Whooping cough, unspecified species with pneumonia	
A48.1	Legionnaires' disease	
B20	Human immunodeficiency virus [HIV] disease	
B25.0	Cytomegaloviral pneumonitis	
B44.0	Invasive pulmonary aspergillosis	
B59	Pneumocystosis	
B77.81	Ascariasis pneumonia	
E84.0	Cystic fibrosis with pulmonary manifestations	
I27.0	Primary pulmonary hypertension	
I27.20	Pulmonary hypertension, unspecified	
I27.21	Secondary pulmonary arterial hypertension	
I27.23	Pulmonary hypertension due to lung diseases and hypoxia	
I27.24	Chronic thromboembolic pulmonary hypertension	
I27.29	Other secondary pulmonary hypertension	
I27.83	Eisenmenger's syndrome	
I27.89	Other specified pulmonary heart diseases	
J09.X1	Influenza due to identified novel influenza A virus with pneumonia	
J09.X2	Influenza due to identified novel influenza A virus with other respiratory manifestations	



J09.X3	Influenza due to identified novel influenza A virus with gastrointestinal manifestations	
J09.X9	Influenza due to identified novel influenza A virus with other manifestation	
J10.00	Influenza due to other identified influenza virus with unspecified type of pneumonia	
J10.01	Influenza due to other identified influenza virus with the same other identified influenza virus pneumonia	
J10.08	Influenza due to other identified influenza virus with other specified pneumonia	
J10.1	Influenza due to other identified influenza virus with other respiratory manifestations	
J10.2	Influenza due to other identified influenza virus with gastrointestinal manifestations	
J10.81	Influenza due to other identified influenza virus with encephalopathy	
J10.82	Influenza due to other identified influenza virus with myocarditis	
J10.83	Influenza due to other identified influenza virus with otitis media	
J10.89	Influenza due to other identified influenza virus with other manifestations	
J11.00	Influenza due to unidentified influenza virus with unspecified type of pneumonia	
J11.08	Influenza due to unidentified influenza virus with specified pneumonia	
J11.1	Influenza due to unidentified influenza virus with other respiratory manifestations	
J11.2	Influenza due to unidentified influenza virus with gastrointestinal manifestations	
J11.81	Influenza due to unidentified influenza virus with encephalopathy	
J11.82	Influenza due to unidentified influenza virus with myocarditis	
J11.83	Influenza due to unidentified influenza virus with otitis media	
J11.89	Influenza due to unidentified influenza virus with other manifestations	
J12.0	Adenoviral pneumonia	
J12.1	Respiratory syncytial virus pneumonia	
J12.2	Parainfluenza virus pneumonia	
J12.3	Human metapneumovirus pneumonia	
J12.81	Pneumonia due to SARS-associated coronavirus	
J12.89	Other viral pneumonia	
J12.9	Viral pneumonia, unspecified	
J13	Pneumonia due to Streptococcus pneumoniae	
J14	Pneumonia due to Hemophilus influenzae	

J15.0	Pneumonia due to Klebsiella pneumoniae	
J15.1	Pneumonia due to Pseudomonas	
J15.20	Pneumonia due to staphylococcus, unspecified	
J15.211	Pneumonia due to Methicillin susceptible Staphylococcus aureus	
J15.212	Pneumonia due to Methicillin resistant Staphylococcus aureus	
J15.29	Pneumonia due to other staphylococcus	
J15.3	Pneumonia due to streptococcus, group B	
J15.4	Pneumonia due to other streptococci	
J15.5	Pneumonia due to Escherichia coli	
J15.61	Pneumonia due to Acinetobacter baumannii	
J15.69	Pneumonia due to other Gram-negative bacteria	
J15.7	Pneumonia due to Mycoplasma pneumoniae	
J15.8	Pneumonia due to other specified bacteria	
J15.9	Unspecified bacterial pneumonia	
J16.0	Chlamydial pneumonia	
J16.8	Pneumonia due to other specified infectious organisms	
J18.0	Bronchopneumonia, unspecified organism	
J18.1	Lobar pneumonia, unspecified organism	
J18.8	Other pneumonia, unspecified organism	
J18.9	Pneumonia, unspecified organism	
J39.8	Other specified diseases of upper respiratory tract	
J40	Bronchitis, not specified as acute or chronic	
J41.0	Simple chronic bronchitis	
J41.1	Mucopurulent chronic bronchitis	
J41.8	Mixed simple and mucopurulent chronic bronchitis	
J42	Unspecified chronic bronchitis	
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]	
J43.1	Panlobular emphysema	
J43.2	Centrilobular emphysema	
J43.8	Other emphysema	
J43.9	Emphysema, unspecified	
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection	
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation	
J44.81	Bronchiolitis obliterans and bronchiolitis obliterans syndrome	
J44.89	Other specified chronic obstructive pulmonary disease	

### **Medical Policy** Northwood

J44.9	Chronic obstructive pulmonary disease, unspecified	
J45.20	Mild intermittent asthma, uncomplicated	
J45.21	Mild intermittent asthma with (acute) exacerbation	
J45.22	Mild intermittent asthma with status asthmaticus	
J45.30	Mild persistent asthma, uncomplicated	
J45.31	Mild persistent asthma with (acute) exacerbation	
J45.32	Mild persistent asthma with status asthmaticus	
J45.40	Moderate persistent asthma, uncomplicated	
J45.41	Moderate persistent asthma with (acute) exacerbation	
J45.42	Moderate persistent asthma with status asthmaticus	
J45.50	Severe persistent asthma, uncomplicated	
J45.51	Severe persistent asthma with (acute) exacerbation	
J45.52	Severe persistent asthma with status asthmaticus	
J45.901	Unspecified asthma with (acute) exacerbation	
J45.902	Unspecified asthma with status asthmaticus	
J45.909	Unspecified asthma, uncomplicated	
J45.990	Exercise induced bronchospasm	
J45.991	Cough variant asthma	
J45.998	Other asthma	
J47.0	Bronchiectasis with acute lower respiratory infection	
J47.1	Bronchiectasis with (acute) exacerbation	
J47.9	Bronchiectasis, uncomplicated	
J60	Coalworker's pneumoconiosis	
J61	Pneumoconiosis due to asbestos and other mineral fibers	
J62.0	Pneumoconiosis due to talc dust	
J62.8	Pneumoconiosis due to other dust containing silica	
J63.0	Aluminosis (of lung)	
J63.1	Bauxite fibrosis (of lung)	-
J63.2	Berylliosis	
J63.3	Graphite fibrosis (of lung)	
J63.4	Siderosis	
J63.5	Stannosis	
J63.6	Pneumoconiosis due to other specified inorganic dusts	
J64	Unspecified pneumoconiosis	
J65	Pneumoconiosis associated with tuberculosis	
J66.0	Byssinosis	
DMEPOS Stand	lard Medical Policy Page 51 of 63 Confidential and Proprieta	ry

## Northwood

J66.1	Flax-dressers' disease	
J66.2	Cannabinosis	
J66.8	Airway disease due to other specific organic dusts	
J67.0	Farmer's lung	
J67.1	Bagassosis	
J67.2	Bird fancier's lung	
J67.3	Suberosis	
J67.4	Maltworker's lung	
J67.5	Mushroom-worker's lung	
J67.6	Maple-bark-stripper's lung	
J67.7	Air conditioner and humidifier lung	
J67.8	Hypersensitivity pneumonitis due to other organic dusts	
J67.9	Hypersensitivity pneumonitis due to unspecified organic dust	
J68.0	Bronchitis and pneumonitis due to chemicals, gases, fumes and vapors	
J68.1	Pulmonary edema due to chemicals, gases, fumes and vapors	
J68.2	Upper respiratory inflammation due to chemicals, gases, fumes and vapors, not elsewhere classified	
J68.3	Other acute and subacute respiratory conditions due to chemicals, gases, fumes and vapors	
J68.4	Chronic respiratory conditions due to chemicals, gases, fumes and vapors	
J68.8	Other respiratory conditions due to chemicals, gases, fumes and vapors	
J68.9	Unspecified respiratory condition due to chemicals, gases, fumes and vapors	
J69.0	Pneumonitis due to inhalation of food and vomit	
J69.1	Pneumonitis due to inhalation of oils and essences	
J69.8	Pneumonitis due to inhalation of other solids and liquids	
J70.0	Acute pulmonary manifestations due to radiation	
J70.1	Chronic and other pulmonary manifestations due to radiation	
J70.2	Acute drug-induced interstitial lung disorders	
J70.3	Chronic drug-induced interstitial lung disorders	
J70.4	Drug-induced interstitial lung disorders, unspecified	
J70.5	Respiratory conditions due to smoke inhalation	
J70.8	Respiratory conditions due to other specified external agents	
J70.9	Respiratory conditions due to unspecified external agent	
J98.09	Other diseases of bronchus, not elsewhere classified	
Q33.4	Congenital bronchiectasis	
T86.00	Unspecified complication of bone marrow transplant	



T86.01	Bone marrow transplant rejection	
T86.02	Bone marrow transplant failure	
T86.03	Bone marrow transplant infection	
T86.09	Other complications of bone marrow transplant	
T86.10	Unspecified complication of kidney transplant	
T86.11	Kidney transplant rejection	
T86.12	Kidney transplant failure	
T86.13	Kidney transplant infection	
T86.19	Other complication of kidney transplant	
T86.20	Unspecified complication of heart transplant	
T86.21	Heart transplant rejection	
T86.22	Heart transplant failure	
T86.23	Heart transplant infection	
T86.290	Cardiac allograft vasculopathy	
T86.298	Other complications of heart transplant	
T86.30	Unspecified complication of heart-lung transplant	
T86.31	Heart-lung transplant rejection	
T86.32	Heart-lung transplant failure	
T86.33	Heart-lung transplant infection	
T86.39	Other complications of heart-lung transplant	
T86.40	Unspecified complication of liver transplant	
T86.41	Liver transplant rejection	
T86.42	Liver transplant failure	
T86.43	Liver transplant infection	
T86.49	Other complications of liver transplant	
T86.5	Complications of stem cell transplant	
T86.810	Lung transplant rejection	
T86.811	Lung transplant failure	
T86.812	Lung transplant infection	
T86.818	Other complications of lung transplant	
T86.819	Unspecified complication of lung transplant	
T86.830	Bone graft rejection	
T86.831	Bone graft failure	
T86.832	Bone graft infection	
T86.838	Other complications of bone graft	
T86.839	Unspecified complication of bone graft	
DMEPOS Standa	ard Medical Policy Page 53 of 63	Confidential and Proprietary

Nebulizers/Compressors (Medicare/Commercial/NH Medicaid)



T86.850	Intestine transplant rejection
T86.851	Intestine transplant failure
T86.852	Intestine transplant infection
T86.858	Other complications of intestine transplant
T86.859	Unspecified complication of intestine transplant
T86.890	Other transplanted tissue rejection
T86.891	Other transplanted tissue failure
T86.892	Other transplanted tissue infection
T86.898	Other complications of other transplanted tissue
T86.899	Unspecified complication of other transplanted tissue
T86.90	Unspecified complication of unspecified transplanted organ and tissue
T86.91	Unspecified transplanted organ and tissue rejection
T86.92	Unspecified transplanted organ and tissue failure
T86.93	Unspecified transplanted organ and tissue infection
T86.99	Other complications of unspecified transplanted organ and tissue
Z43.0	Encounter for attention to tracheostomy
Z93.0	Tracheostomy status

### Group 14

### **Group 14 Paragraph**

### For HCPCS codes K0730, Q4074:

### **Group 14 Codes**

Code	Description
127.0	Primary pulmonary hypertension
127.20	Pulmonary hypertension, unspecified
I27.21	Secondary pulmonary arterial hypertension
127.83	Eisenmenger's syndrome
127.89	Other specified pulmonary heart diseases



### ICD-10 Codes that DO NOT Support Medical Necessity

**Paragraph:** For the specific HCPCS codes indicated above, all ICD-10 codes that are not specified in the previous section.

For HCPCS codes A7009, E0575, J7604, J7607, J7609, J7610, J7615, J7622, J7624, J7627, J7628, J7629, J7632, J7634, J7635, J7636, J7637, J7638, J7640, J7641, J7642, J7643, J7645, J7647, J7650, J7657, J7660, J7667, J7670, J7676, J7680, J7681, J7683, J7684, and J7685 all ICD-10 codes.

For all other HCPCS codes, ICD-10 codes are not specified.

#### **Documentation Requirements**

Items in this policy may be subject to the Affordable Care Act (ACA) 6407 requirements.

The Affordable Care Act (ACA) 6407 requires that the treating practitioner conduct a face-to-face examination during the six-month period preceding the written order. The documentation must be received by the provider prior to delivery for certain DME items. The documentation must describe a medical condition for which the DME is being prescribed.

### **Coding Guidelines:**

Code E0467 (HOME VENTILATOR, MULTI-FUNCTION RESPIRATORY DEVICE, ALSO PERFORMS ANY OR ALL OF THE ADDITIONAL FUNCTIONS OF OXYGEN CONCENTRATION, DRUG NEBULIZATION, ASPIRATION, AND COUGH STIMULATION, INCLUDES ALL ACCESSORIES, COMPONENTS AND SUPPLIES FOR ALL FUNCTIONS) describes a ventilator that integrates the function of multiple types of equipment into a single device. Code E0467 combines the function of a ventilator with those of any combination of or all of the following:

- Oxygen equipment
- Nebulizer and compressor
- Aspirator (suction device)
- Cough stimulator (multiple products)
- Positive airway pressure devices (PAP and RAD)
- Custom fabricated oral appliances

The following nebulizers and related accessories HCPCS codes for individual items are included in the functionality of code E0467:

HCPCS codes E0565, E0570, E0572, E0585, A4619, A7003, A7004, A7005, A7006, A7007, A7012, A7013, A7014, A7015, A7017, A7525, and E1372



Claims for any of the HCPCS codes listed above that are submitted on the same claim or that overlap any date(s) of service for E0467 is considered to be unbundling. In addition, any claim for repair (HCPCS code K0739 for labor and any HCPCS code for replacement items) of beneficiary-owned equipment identified by HCPCS codes listed above is considered as unbundling if the date(s) of service for the repair overlaps any date(s) of service for code E0467.

Claims for code E0467 with a date(s) of service that overlaps date(s) of service for any of the following scenarios are considered as a claim for same or similar equipment when the beneficiary:

- Is currently in a rental month for any of the items listed above
- Owns any of the equipment listed above that has not reached the end of its reasonable useful lifetime.

### **Important Note:**

Northwood's Medical Policies are developed to assist Northwood in administering plan benefits and determining whether a particular DMEPOS product or service is reasonable and necessary. Equipment that is used primarily and customarily for a non-medical purpose is not considered durable medical equipment.

Coverage determinations are made on a case-by-case basis and are subject to all of the terms, conditions, limitations, and exclusions of the member's contract including medical necessity requirements.

The conclusion that a DMEPOS product or service is reasonable and necessary does not constitute coverage. The member's contract defines which DMEPOS product or service is covered, excluded or limited. The policies provide for clearly written, reasonable and current criteria that have been approved by Northwood's Medical Director.

The clinical criteria and medical policies provide guidelines for determining the medical necessity for specific DMEPOS products or services. In all cases, final benefit determinations are based on the applicable contract language. To the extent there are any conflicts between medical policy guidelines and applicable contract language, the contract language prevails. Medical policy is not intended to override the policy that defines the member's benefits, nor is it intended to dictate to providers how to direct care. Northwood Medical policies shall not be interpreted to limit the benefits afforded to Medicare or Medicaid members by law and regulation and Northwood will use the applicable state requirements to determine required quantity limit guidelines.



Northwood's policies do not constitute medical advice. Northwood does not provide or recommend treatment to members. Members should consult with their treating practitioner in connection with diagnosis and treatment decisions.

Northwood follows all CMS National Coverage Determinations (NCD) and Local Coverage Determinations (LCD), as applicable.

### References

Centers for Medicare and Medicaid Services, Medicare Coverage Database, National Coverage Documents; October 2015. Accessed December 04, 2020. Accessed/reviewed December 6, 2021

CGS Administrators, LLC. Jurisdiction B DME MAC, Nebulizers. Local Coverage Determination No. L33370; revised date May 17, 2020. Accessed December 04, 2020. Accessed/reviewed December 2,2024

National Heritage Insurance Company (NHIC), Nebulizers. Local Coverage Determination No. L11499. Durable Medical Equipment Medicare Administrative Carrier Jurisdiction A. Chico, CA: NHIC; revised May 17, 2020.

### SPECIAL COVERAGE INFORMATION PER PLAN:

WELLSENSE AND HEALTH NEW ENGLAND (HNE) – MEMBERS (AGES 0 – 18) – SMALL VOLUME NEBULIZER MEDICAL CRITERIA	Small volume nebulizers (EO570) and related supplies (A7003, A7004 and A7005) are a benefit and may be considered medically necessary for administering inhalation medications for the following conditions:
	<ul> <li>Bronchiectasis – any type</li> <li>Bronchopulmonary dysplasia/chronic lung disease of prematurity</li> <li>Primary ciliary dyskinesia</li> <li>Tracheomalacia and bronchomalacia</li> <li>Neuromuscular disease</li> <li>Cystic fibrosis (CF) with pulmonary manifestations</li> <li>Pneumonia – any type</li> <li>Influenza</li> <li>Bronchitis – any type</li> <li>Asthma – any type</li> </ul>



<ul> <li>Chronic Obstructive Pulmonary Disease (COPD) – any type</li> <li>Pneumoconiosis – any type</li> <li>Acute, sub-acute, or chronic respiratory conditions</li> <li>Respiratory conditions due to radiation, smoke, unspecified and specified external agents</li> <li>Abnormal sputum</li> <li>Other diseases of the trachea and bronchus</li> <li>Tracheostomy status</li> <li>Attention to tracheostomy</li> <li>Any immunodeficiency with pulmonary manifestations</li> <li>Pneumocystosis</li> <li>Complications of a specified or unspecified transplanted organ, bone marrow, or stem cells</li> <li>Primary pulmonary hypertension</li> <li>Other chronic pulmonary heart disease</li> <li>Recurrent pneumonia</li> <li>Any neurological disease with pulmonary manifestations (including but not limited to cerebral palsy, intractable seizure disorder, and any other neurologic condition that is associated with impaired airway clearance)</li> </ul>

#### **Change/Authorization History**

Revision	Date	Description of	Prepared/Reviewed	Approved	Review	Effective
Number		Change	by	by	Date:	Date:
А	Nov.2006	Initial Release	Rosanne Brugnoni	Ken Fasse	n/a	

	1			1		· · · · · · · · · · · · · · · · · · ·
01		Annual Review / no revisions	Susan Glomb	Ken Fasse	Dec.2008	
02	Jan.2009	No changes made. Update for Medication only.	Susan Glomb	Ken Fasse		
03	Dec.1, 2009	Medication timing coverage updates. Added GA and GZ modifiers. Revised KX modifier descriptor.	Susan Glomb	Ken Fasse		
04	12-22-09	Annual Review/ no changes	Susan Glomb	Ken Fasse	Dec. 2009	
05	01-05-10	Code:Q4074 added. iloprost, inhalation solution, FDA- approved final product, non- compounded, administered through DME, unit dose form, up to 20mcg. Discontinued code: Q4080. iloprost, inhalation solution, FDA- approved final product, non- compounded, administered through DME, unit dose form 20mcg.	Susan Glomb	Ken Fasse		
06	12-03-10	Annual Review- No changes	Susan Glomb	Ken Fasse	Dec.2010	
07	01-18-11	Added: Preamble language. Added: Coding	Susan Glomb	Ken Fasse	Jan2011	



		information for nebulizer used to administer aztreonam lysine and related accessories. Added: Coding verification review for E0574 ultrasonic nebulizers (effective on or after 4-1-11.				
08	02-04-11	Revised coverage of E0574, E0575. Deleted references to code E0571 added for individual consideration only. Added J7686 Revised J7013. Deleted E0571. Added A7013, A7014, A7016, E0574, J7686 to pulmonary hypertension. Deleted E0574 from COPD code set. Deleted Code E0571.	Susan Glomb	Ken Fasse		
09	07-20-11	Added Important Note to all Medical Policies	Susan Glomb	Dr. B. Almasri		
10	11-14-11	Annual Review. Added References to Policy	Susan Glomb	Dr. B. Almasri	Nov. 2011	
11	04-04-12	Added reference to NH Medicaid	Susan Glomb	Dr. B. Almasri		
12	11-29-12	Annual Review – No changes	Susan Glomb	Dr. B. Almasri	Nov 12	

Confidential and Proprietary

### Northwood

	12-18-13	Annual Review.	Sugar Clamb	Dr. B.		
13	12-18-13	No changes	Susan Glomb	Almasri		
14	12-4-14	Annual Review. Added: Items in this policy may be subject to the Affordable Care Act (ACA) 6407 requirements	Susan Glomb	Dr. B. Almasri		
15	12-14-15	Annual Review. Updated policy with Medicare policy criteria. References updated. Updated policy with ICD- 10 codes.	Susan Glomb	Dr. B. Almasri		
16	12-02-16	Annual Review. No Changes.	Lisa Wojno	Dr. B. Almasri	December 2016	
17	12-19-17	Annual review. Per Medicare, added new ICD- 10 codes to groups 11, 12, 13.	Carol Dimech	Dr. C. Lerchin	December 2017	
18	12-01-18	Annual Review. Updated policy to add Well Sense infant/pediatric member criteria for small volume nebulizers.	Lisa Wojno	Dr. C. Lerchin	December 2018	
19	3-25-19	Added HNE to infant/pediatric member criteria box for small volume nebulizers.	Carol Dimech	Dr. C. Lerchin	March 2019	
20	12-13-19	Annual review. Added: E0467 coding guidelines; Removed: I27.23	Carol Dimech	Dr. C. Lerchin	December 2019	December



		and I27.29 from Group 11 Codes due to conflict with coverage criteria per CGS guidelines.				2019
21	12-04-20	Annual Review. Updated 'physician' to 'practitioner'. Clarified: "considered for coverage" to drug and equipment criteria Added: Revefenacin to inhalation solutions for the management of obstructive pulmonary disease. Revised: "alpha" to "alfa" in relation to HCPCS code J7639.	Lisa Wojno	Dr. C. Lerchin	December 2020	December 2020
22	12-06-21	Annual Review. Added NCD/LCD verbiage to "Important Note".	Carol Dimech/Susan Glomb	Dr. C. Lerchin	December 6, 2021	
23	12-14-22	Annual review. Removed: HCPCS codes K0730 and Q4074 from Group 11 Paragraph and ICD-10 I27.24 from group 11. Added: ICD-10- CM code I27.23 to group 11 codes; added group 14 paragraph for HCPCS codes	Carol Dimech	Dr. C. Lerchin	December 14, 2022	December 14, 2022

Confidential and Proprietary



		K0730 and Q4074; added group 14 Codes section for ICD- 10-CM codes.				
24	12-5-23	Annual review. Per CMS, Removed ICD-10 code J15.6. Updated ICD-10 list – added J12.82, U07.1, U09.9 to Groups 3, 8, 12; added J15.61 and J15.69 to Groups 2, 3, 7, 12, 13; added J44.81 and J44.89 to Groups 2, 3, 6, 7, 8, 12, 13.	Carol Dimech	Dr. C. Lerchin	December 5, 2023	December 5, 2023
25	12-02-24	Annual review. No changes.	Susan Glomb	Dr. C. Lerchin	December 2, 2024	December 2, 2024