

## Medical Policy



### Nebulizers/Compressors

#### 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

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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

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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  $\leq 15$  mm 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.

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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:**

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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.

<b>Compressor/ Generator</b>	<b>Related Accessories</b>
E0565	A4619, A7006, A7007, A7010, A7011, A7012, A7013, A7014, A7015, 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.

<b>Accessory</b>	<b>Usual Maximum Replacement</b>
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:**

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

<b>Inhalation Drugs and Solutions</b>	<b>Maximum Milligrams/Month</b>
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 saline in large volume nebulizer	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:

<b>Drug</b>	<b>Maximum Milligrams/Month</b>
Albuterol	78 mg/month
Albuterol/Ipratropium 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.

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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 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.

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 long-acting 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)

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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
E0565	COMPRESSOR, AIR POWER SOURCE FOR EQUIPMENT WHICH IS NOT SELF- CONTAINED OR CYLINDER DRIVEN
E0570	NEBULIZER, WITH COMPRESSOR
E0572	AEROSOL COMPRESSOR, ADJUSTABLE PRESSURE, LIGHT DUTY FOR INTERMITTENT USE
E0574	ULTRASONIC/ELECTRONIC AEROSOL GENERATOR WITH SMALL 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 PNEUMATIC NEBULIZER, DISPOSABLE
A7004	SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, DISPOSABLE
A7005	ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, NON-DISPOSABLE
A7006	ADMINISTRATION SET, WITH SMALL VOLUME FILTERED PNEUMATIC NEBULIZER
A7007	LARGE VOLUME NEBULIZER, DISPOSABLE, UNFILLED, USED WITH AEROSOL COMPRESSOR
A7008	LARGE VOLUME NEBULIZER, DISPOSABLE, PREFILLED, USED WITH AEROSOL COMPRESSOR
A7009	RESERVOIR BOTTLE, NON-DISPOSABLE, USED WITH LARGE VOLUME ULTRASONIC NEBULIZER
A7010	CORRUGATED TUBING, DISPOSABLE, USED WITH LARGE VOLUME NEBULIZER, 100 FEET
A7011	CORRUGATED TUBING, NON-DISPOSABLE, USED WITH LARGE VOLUME NEBULIZER, 10 FEET



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A7012	WATER COLLECTION DEVICE, USED WITH LARGE VOLUME NEBULIZER
A7013	FILTER, DISPOSABLE, USED WITH AEROSOL COMPRESSOR OR ULTRASONIC GENERATOR
A7014	FILTER, NONDISPOSABLE, USED WITH AEROSOL COMPRESSOR OR ULTRASONIC GENERATOR
A7015	AEROSOL MASK, USED WITH DME NEBULIZER
A7016	DOME AND MOUTHPIECE, USED WITH SMALL VOLUME ULTRASONIC NEBULIZER
A7017	NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC, BOTTLE TYPE, NOT USED WITH OXYGEN
A7525	TRACHEOSTOMY MASK, EACH
E0580	NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC, 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, 1000 ML
G0333	PHARMACY DISPENSING FEE FOR INHALATION DRUG(S); INITIAL 30-DAY SUPPLY AS A BENEFICIARY
J2545	PENTAMIDINE ISETHIONATE, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER 300 MG
J7604	ACETYLCYSTEINE, INHALATION SOLUTION, COMPOUNDED PRODUCT, ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER GRAM
J7605	ARFORMOTEROL, INHALATION SOLUTION, FDA APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, 15 MICROGRAMS
J7606	FORMOTEROL FUMARATE, INHALATION SOLUTION, FDA APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, 20

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

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

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

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

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### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

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



## Medical Policy



### Nebulizers/Compressors

**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



## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### 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

## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

J15.7	Pneumonia due to <i>Mycoplasma pneumoniae</i>
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



## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

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 organ and tissue
T86.91	Unspecified transplanted organ and tissue rejection
T86.92	Unspecified transplanted organ and tissue failure

## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### 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

## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

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



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### 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

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### Nebulizers/Compressors

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

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### Nebulizers/Compressors

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

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### Nebulizers/Compressors

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

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### 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

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### Nebulizers/Compressors

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

**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

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### Nebulizers/Compressors

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

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### Nebulizers/Compressors

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



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### Nebulizers/Compressors

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:**

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### Nebulizers/Compressors

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

## Medical Policy



### Nebulizers/Compressors

	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

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### Nebulizers/Compressors

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

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### 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

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### Nebulizers/Compressors

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



### 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

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### Nebulizers/Compressors

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



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### Nebulizers/Compressors

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

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### Nebulizers/Compressors

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

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### Nebulizers/Compressors

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

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### Nebulizers/Compressors

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

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### Nebulizers/Compressors

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

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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
<b>I27.0</b>	<b>Primary pulmonary hypertension</b>
<b>I27.20</b>	<b>Pulmonary hypertension, unspecified</b>
<b>I27.21</b>	<b>Secondary pulmonary arterial hypertension</b>
<b>I27.83</b>	<b>Eisenmenger's syndrome</b>
<b>I27.89</b>	<b>Other specified pulmonary heart diseases</b>

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### Nebulizers/Compressors

#### 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

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### Nebulizers/Compressors

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.



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### Nebulizers/Compressors

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. Last accessed/reviewed December 4, 2025.

CGS Administrators, LLC. Jurisdiction B DME MAC, Nebulizers. Local Coverage Determination No. L33370. Last accessed/reviewed December 4, 2025.

National Heritage Insurance Company (NHIC), Nebulizers. Local Coverage Determination No. L11499. Durable Medical Equipment Medicare Administrative Carrier Jurisdiction A. Chico, CA: NHIC. Last accessed/reviewed December 4, 2025.

#### SPECIAL COVERAGE INFORMATION PER PLAN:

<b>WELLSENSE AND HEALTH NEW ENGLAND (HNE) – MEMBERS (AGES 0 – 18) – SMALL VOLUME NEBULIZER MEDICAL CRITERIA</b>	<p>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:</p> <ul style="list-style-type: none"><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><li>• Chronic Obstructive Pulmonary Disease (COPD) – any type</li><li>• Pneumoconiosis – any type</li><li>• Acute, sub-acute, or chronic</li></ul>
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# Medical Policy



## Nebulizers/Compressors

	<p>respiratory conditions</p> <ul style="list-style-type: none"> <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>
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### Change/Authorization History

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

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### Nebulizers/Compressors

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 information for nebulizer used to administer aztreonam lysine and related accessories. Added: Coding	Susan Glomb	Ken Fasse	Jan2011	

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### Nebulizers/Compressors

		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	
13	12-18-13	Annual Review. No changes	Susan Glomb	Dr. B. Almasri		
14	12-4-14	Annual Review. Added: Items in this policy may	Susan Glomb	Dr. B. Almasri		

# Medical Policy



## Nebulizers/Compressors

		be subject to the Affordable Care Act (ACA) 6407 requirements				
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 and I27.29 from Group 11 Codes due to conflict with coverage criteria per CGS guidelines.	Carol Dimech	Dr. C. Lerchin	December 2019	December 2019

## Medical Policy



### Nebulizers/Compressors

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 K0730 and Q4074; added group 14 Codes section for ICD-10-CM codes.	Carol Dimech	Dr. C. Lerchin	December 14, 2022	December 14, 2022

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### Nebulizers/Compressors

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
26	12-04-25	Annual review. No changes.	Lisa Wojno	Dr. C. Lerchin	December 4, 2025	December 4, 2025