

**FIRST COAST SERVICE OPTIONS
MAC – PART A/B
CODING GUIDELINES**

LCD Database ID Number

L33261

Contractor Name

First Coast Service Options, Inc.

Contractor Number

09101 – Florida
09201 – Puerto Rico/Virgin Islands
09102 – Florida
09202 – Puerto Rico
09302 –Virgin Islands

LCD Title

Allergy Testing

Coding Guidelines

In vitro testing is covered when medically reasonable and necessary as a substitute for skin testing; it is not usually necessary in addition to skin testing.

When photo patch test(s) (CPT code 95052) are performed (same antigen/same session) with patch or application test(s) (CPT code 95044), only the photo patch tests should be reported.

In the event photo tests (CPT code 95056) are performed with patch or application test(s) (CPT code 95044), only the photo tests should be reported.

Per the Centers for Medicare and Medicaid Services (CMS) National Correct Coding Initiative (NCCI) Policy Manual for Medicare Services, Chapter 11 (<http://www.cms.gov/NationalCorrectCodInitEd/>):

1. If percutaneous or intracutaneous (intradermal) single test (CPT codes 95004 or 95024) and "sequential and incremental" tests (CPT codes 95017, 95018, or 95027) are performed on the same date of service, both the "sequential and incremental" test and single test codes may be reported if the tests are for different allergens or different dilutions of the same allergen. The unit of service to report is the number of separate tests. A single test and a "sequential and incremental" test for the same dilution of an allergen should not be reported separately on the same date of service. For example, if the single test for an antigen is positive and the physician proceeds to "sequential and incremental" tests with three additional *different* dilutions of the same antigen, the physician may report one unit of service for the single test code and three units of service for the "sequential and incremental" test code.
2. Photo patch tests (CPT code 95052) consist of applying a patch(s) containing allergenic substance(s) to the skin and exposing the skin to light. Physicians should not unbundle this service by reporting both CPT code 95044 (patch or application tests) plus CPT code 95056 (photo tests) rather than CPT code 95052.
3. Evaluation and management (E&M) codes reported with allergy testing or allergy immunotherapy are appropriate only if a significant, separately identifiable service is performed.

Allergy Testing_code guide

Obtaining informed consent is included in the immunotherapy service and should not be reported with an E&M code. If E&M services are reported, modifier 25 should be utilized.

4. Allergy testing is not performed on the same day as allergy immunotherapy in standard medical practice. These codes should not be reported together for the same date of service. Additionally, testing is an integral component of rapid desensitization kits (CPT code 95180) and is not separately reportable.

Comments

This LCD does not directly address the following allergy tests:

- CPT code 95070 - Inhalation bronchial challenge testing (not including necessary pulmonary function tests); with histamine, methacholine, or similar compounds
- CPT code 95071 - Inhalation bronchial challenge testing (not including necessary pulmonary function tests); with antigens or gases, specify
- *CPT code 95075 - Ingestion challenge test (sequential and incremental ingestion of test items, eg, food, drug or other substance such as metabisulfite)

**CPT code 95075 is covered when it is used on an outpatient basis if it is reasonable and necessary for the individual patient. Challenge ingestion food testing has not been proven to be effective in the diagnosis of rheumatoid arthritis, depression, or respiratory disorders. Accordingly, its use in the diagnosis of these conditions is not reasonable and necessary within the meaning of §1862(a)(1) of the Act, and no program payment is made for this procedure when it is so used (CMS Manual System, Pub 100-03, Medicare National Coverage Determinations Manual, Chapter 1, Part 2, Section 110.12).*

It is expected that the services represented by the above CPT codes would be performed based on findings during a complete medical and immunologic history and appropriate physical exam obtained by face-to-face contact with the patient, and in accordance with current standards of care.

Revision History

Date	Revision
10/01/2015	This "Coding Guideline" replaces all previous "Coding Guidelines" to comply with ICD-10-CM based on Change Request 8112. The effective date of this "Coding Guideline" is based on date of service.

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