Asthma Billing Codes

Code	Description	Same office and facility reimbursement:	Physician:	Midlevel:			
Spirometry							
94010	forced vital capacity/basic spirometry spirometry with pre vs post bronchodilator		\$39.75	\$35.77			
94060			\$66.34	\$59.70			
94617	spirometry with exer	rcise induced bronchospasm	\$102.53	\$102.53			
94070	spirometry with indu	iced bronchospasm	\$66.34	\$66.34			
		(cold air, methacholine, etc)					
Inhaler technique							
94664	evaluate patient use	e of inhaler	\$18.69	\$16.82			
Health Risk Assessment Asthma Control Test, C-ACT, ATAQ, ACQ							
96160	patient focused hea	alth risk assessment	\$2.77	\$2.49			
		C	Out-patient/office:	Hospital/ Facility:			

Asthma Education

Individual preventative education/risk factor reduction intervention

99401	15 min	\$44.84	\$28.64
99402	30 min	\$74.16	\$58.36
99403	45 min	\$101.26	\$85.46
99404	60 min	\$129.83	\$114.42

Group preventative education/risk factor reduction intervention

99411 99412	30 min 60 min		\$22.24 \$28.29	\$8.81 \$14.86		
Tobacco Cessation						
99406	3-10 min	Mid-level Provider	\$15.50 \$17.23	\$12.66 \$14.07		
99407	greater than 10 min	Mid-level Provider	\$29.69 \$32.99	\$26.84 \$29.83		

Exact reimbursement will vary per site. The above reimbursement are based on the 2021 MT Medicaid Physician's Fee Schedule. Specific diagnosis codes and documentation may be required to bill specific codes. Please consult with your billing department for optimal use and requirements at your location.

