

Breezing Med Indirect Calorimetry



Self-calibrating calorimeter accurately measures both CO₂ and O₂ and Resting Metabolic Rate (RMR), RQ remotely or onsite

Possible Reimbursement Coding Options

94690 (\$50 -\$100.00) Typical: \$70)	Oxygen uptake, expired gas analysis; rest, indirect. Provider may run test to evaluate a patient with bronchial allergy or hypersensitivity, bacterial lung infections, or pulmonary tumor. If medical necessity exists , most insurance carriers including Medicare consider coverage. 94690 may not be considered medically necessary for asymptomatic overweight individuals to determine the extent of abnormalities and the causative disease process, progression of disease, a course of therapy in the treatment of a particular condition.
99401 (\$30- \$40)- 99404 (\$110-\$130)	Those common obesity-related codes are used to report counseling/or risk factor reduction intervention to individuals. 99401: 15 min, 99402: 30 min (\$60-\$70), 99403: 45 min (\$80-\$100), 99404: 60 min.
99411 -99412	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting: 99411: 30 min. 99412: 60 min.
G0447 (Individual) G0443 (Group, 2-10)	Face-to-face behavioral counseling for obesity, 15 minutes. Those codes must be used with ICD-10 codes for BMI 30.0 and over (Z68.30 – Z68.39, Z68.41 – Z68.45).
99078	It is for group education provided to patients (e.g., obesity or diabetic self-management).

Indirect calorimetry is used to assess structural component status of the lung per Center for Medicare Services (CMS). Medicare excludes screening test for an asymptomatic patient, with or without high risk of lung disease. ICD-10-CM codes below, used by healthcare professionals, support medical necessity by CMS.

ICD-10-CM¹

Code E66.1, E66.2	Obesity induced by use of drugs (E66.1). Extreme obesity with alveolar hypoventilation (E66.2)
Code E66.8, E66.9	Morbid obesity (E66.8). Unspecified obesity (Simple Obesity NOS, E66.9)
Code Z71.3	Dietary counseling and surveillance

1. The following ICD-10-CM codes may support medical necessity by CMS in terms of evaluating structural lung components:

Code G47.36	Sleep Apnea, Hypoventilation: 2023 ICD-10-CM Diagnosis Code G47.36 - ICD10Data.com
Code I27.9	Chronic Pulmonary Heart Disease: 2023 ICD-10-CM Diagnosis Code I27.9
Code I50.9	Heart Failure: 2023 ICD-10-CM Diagnosis Code I50.9
Code J45. 909	Asthma: 2023 ICD-10-CM Diagnosis Code J45.909
Code J44.9	Chronic Airway Obstruction (COPD): 2023 ICD-10-CM Diagnosis Code J44.9
Code J99	Lung involvement in other diseases classified elsewhere: 2023 ICD-10-CM Diagnosis Code J99
Code G47.9	Sleep Disturbances: 2023 ICD-10-CM Diagnosis Code G47.9
Code R06.02, R09.2	Dyspnea and Respiratory Abnormalities, Shortness of Breath (R06.02): 2023 ICD-10-CM Diagnosis Code R06.02 . Hypoxemia: 2023 ICD-10-CM Diagnosis Code R09.02

2. The following alternative ICD-10-CM codes may support medical necessity by private payers:

Code E03.9	Hypothyroidism: 2023 ICD-10-CM Diagnosis Code E03.9
Code E88.81	Metabolic Syndrome: 2023 ICD-10-CM Diagnosis Code E88.81
Code E11.65	Diabetes Mellitus: 2023 ICD-10-CM Diagnosis Code E11.65
Code E66.9	Obesity: 2023 ICD-10-CM Diagnosis Code E66.9
Code E78.00	Hypercholesterolemia: 2023 ICD-10-CM Diagnosis Code E78.00
Code I10	Hypertension: 2023 ICD-10-CM Diagnosis Code I10
Code E78.5	Hyperlipidemia: 2023 ICD-10-CM Diagnosis Code E78.5
Code I51.9	Cardiovascular Disease: 2023 ICD-10-CM Diagnosis Code I51.9

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FDA cleared and CPT coded for reimbursement.

Telemedicine ready feature.

<p>Physician Coding</p> <p>1. CPT Code 94690 Office Visits¹ (\$48.12-\$52.57)</p> <p>2. CPT Codes 99202 (\$72.86) - 99205 (\$220.9)</p> <p>3. CPT Codes 99211 (\$23.46) - 99215 (\$148)</p>	<p>1. Oxygen uptake, expired gas analysis; rest, indirect (separate procedure). (Note: Contact insurance carriers for coding guidelines to determine if REE measurement should be billed separately or in conjunction with an office visit.)</p> <p>2. For new patients being seen in the office evaluation/management. (99202: 15-29 min. 99203: 30-44 min., <u>\$112.84</u>; 99204: 45-59 min., <u>\$167.40</u>; 99205: 60-74 min.)</p> <p>3. Established patient office or outpatient services for evaluation/ management. (99211: 5 min. 99212: 10 min., <u>\$90</u>; 99213: 15 min., <u>\$90</u>; 99214: 25 min., <u>\$90</u>; 99215: 40 min.)</p>
<p>Dietitian Coding</p> <p>1. CPT Code 94690 MNT²</p> <p>2. CPT Codes 97802 (\$28-\$39) -97804 (\$14) Medical Nutrition Therapy (MNT)</p>	<p>1. Oxygen uptake, expired gas analysis; rest, indirect (separate procedure). (Note: Contact insurance carriers for guidelines to determine if REE measurement should be billed separately or in conjunction with medical nutrition therapy.)</p> <p>2. 99802: 15 min new patient onsite initial assessment and intervention, once per year); 99803: 15 min. reassessment and intervention (\$24 to \$36); 99804: 30 min group (2 or more) assessment and intervention.</p>

For obesity-management appointment, use [CPT code 99213](#) (15-minute appointment of established patient), along with modifier 25, ICD-10 code E66.09, and BMI Z code Z68.31. When billing for lifestyle therapy, use [CPT code 99401](#) (preventive counseling and/or risk factor reduction intervention provided to individual) along with modifier 33 (for preventive service), Z code Z71.3 (for dietary counseling and surveillance), and BMI Z code Z68.3.

Notes: 1. The codes above are guide for coding procedures and services for Indirect Calorimeter. Visit websites: <https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=57216> and [2023 ICD-10-CM](#) | and <https://connectwithcare.org/key-telehealth-provisions-in-the-calendar-year-2023-physician-fee-schedule-final-rule/>

2. Insurances allow MNT services only for: 1) diagnosis codes E11.XX (ICD-10- CM), O24.XXX (ICD-10-CM) for diabetes, gestational diabetes. 2) for eating disorders ICD-10-CM diagnoses F50.00 and F50.2, F50.9, and 3) dietitian assessments as part of a multi-disciplinary eating disorder evaluation.

<p>Medical Necessity Criteria</p>	<p>Medical necessity must be established for indirect calorimetry (IC) reimbursement. Consult insurance carrier’s guidelines on criteria for medical necessity.</p>
<p>Preauthorization Recommended</p>	<p>Verify with insurance carriers or state’s Medicare or Medicaid agency before starting additional treatment; record additional comorbidities associated with obesity addressed at visits, such as hypertension, diabetes. Preauthorization allows plans to evaluate if care is medically necessary and covered. Patients can sign a Waiver of Financial Liability in case non-coverage or partial coverage decision is received.</p>
<p>CPT/ICD Codes</p> <p>1. <u>CPT codes</u> are procedure codes describing services rendered by healthcare professionals.</p> <p>2. <u>ICD-10 codes</u> are used to describe a medical diagnosis. They are outside dietitians’ scope of practice to make a medical diagnosis.</p>	<p>CPT Information Services indicates CPT94690 is an appropriate code for indirect calorimetry REE measurement. Coding is ultimately decisions of physicians, RDs, and insurance carriers based on procedure as per patient’s medical record.</p> <p>To get ICD-10 codes, dietitians request a referral from patient’s physician for MNT. Common ICD-10 diagnosis codes Dietitians will see on referrals are Z71.3, E11, E66.0, E66.3, see https://www.cms.gov/Medicare/Coverage/CoverageGenInfo/ICD10.html.</p> <p>Unlisted CPT codes are used when a service or procedure is not described by existing CPT codes. Insurance carriers will make decisions based on coverage guidelines and claim documentation submitted which assist insurance carriers in determining medical appropriateness for the procedure. A special report is recommended to be submitted with all unlisted claims describing nature, extent, and need for the procedure, time, effort and equipment necessary perform the procedure.</p>