

Pulmonary Function Testing Policy

Purpose

This policy is intended to ensure correct provider reimbursement and serves only as a general resource regarding Molina Healthcare's reimbursement policy for the services described in this policy. It is not intended to address every aspect of a reimbursement situation, nor is it intended to impact care decisions. This policy was developed using nationally accepted industry standards and coding principles. In a conflict, federal and state guidelines, as applicable, and the member's benefit plan document supersede the information in this policy. Also, to the extent of conflicts between this policy and the provider contract language, the Provider contract language will prevail. Coverage may be mandated by applicable legal requirements of a State, the Federal government or the Centers for Medicare and Medicaid Services (CMS). References included were accurate at the time of policy approval. If there is a state exception, please refer to the state exception table listed below.

Policy Overview

Pulmonary Function Testing (PFT), also known as lung function tests, refers to a group of medical diagnostic procedures designed to assess the functioning of a person's respiratory system, specifically their lungs. These tests are performed by healthcare professionals, often in a specialized pulmonary function laboratory or clinic, and they provide valuable information about a person's lung capacity, airflow, and overall lung health. PFTs are used to diagnose and monitor various respiratory conditions, as well as to evaluate how well the lungs are working before surgery or as part of ongoing disease management.

Some common measurements and parameters assessed during pulmonary function testing include:

- **Spirometry:** This test measures the volume and speed of air that a person can inhale and exhale. It provides data on lung capacity and airflow rates. Parameters measured include Forced Vital Capacity (FVC), Forced Expiratory Volume in one second (FEV1), and FEV1/FVC ratio.
- **Peak Expiratory Flow (PEF):** PEF measures the maximum speed at which a person can exhale air from their lungs. It is often used to monitor asthma and assess the severity of airflow limitation.
- **Lung Volume Measurements:** These tests evaluate the total lung capacity (TLC), residual volume (RV), and functional residual capacity (FRC). They provide information about lung size and the distribution of air within the lungs.
- **Diffusing Capacity:** This test measures effectively gases like oxygen and carbon dioxide exchanged in the lungs. It helps assess the efficiency of gas transfer across the lung's alveoli.
- **Lung Compliance:** Lung compliance measures how easily the lungs can expand and contract. Reduced compliance can indicate stiffness in the lungs, which can be caused by conditions like fibrosis.
- **Bronchial Provocation Tests:** These tests are used to assess airway hyperresponsiveness, which is a hallmark of conditions like asthma. They involve inhaling substances that may trigger bronchial constriction.
- **Exercise Testing:** Exercise or stress testing evaluates how well the lungs function during physical exertion. It can help diagnose exercise-induced bronchoconstriction or assess overall fitness.



Pulmonary function testing is crucial in diagnosing and managing a wide range of respiratory conditions, including asthma, chronic obstructive pulmonary disease (COPD), interstitial lung diseases, and restrictive lung diseases. It can also help determine the effectiveness of treatments and guide healthcare providers in making informed decisions about patient care.

It's important to note that PFTs should be performed and interpreted by trained professionals, such as pulmonologists or respiratory therapists, as the results can be complex and require clinical expertise to properly evaluate and diagnose respiratory conditions.

Reimbursement Guidelines

Pulmonary Function Testing Codes are outlined as follows:

- **CPT codes** aligned with the Standards of Reasonable and Necessary Care are: 94070, 94200, 94640, 94726, 94727, and 94729.
- **Spirometry** - CPT codes for Spirometry encompass 94010, 94011, 94012, 94060, 94070, 94150, 94200, 94375, 94726, and 94727. It's important to note that repetitive billing for unnecessary tests is not considered clinically reasonable.
- **Lung Volume** - CPT codes for lung volume determination are 94013, 94726, 94727, and 94728.
- **Diffusion Capacity** - CPT codes for diffusion capacity include 94729.
- **Pulmonary stress testing** - CPT codes for pulmonary stress testing encompass 96417, 96418, 94619, and 96421.

Please be aware that **CPT 94664** is intended for device "demonstration and/or evaluation" and is typically reimbursed once per beneficiary for the same provider or group.

Molina Healthcare stipulates that Pulmonary Function Testing must be billed in accordance with the correct Dx (diagnosis) codes. Failure to do so may result in claims being denied, and any incorrectly paid claims will be subject to recovery.

Supplemental Information

Definitions

Term	Definition
CMS	The Centers for Medicare & Medicaid Services
PFT	Pulmonary Function Testing
RV	Residual Volume
TLC	Total Lung Capacity

State Exceptions

State	Exception
MI	Exempt from Policy

Documentation History

Type	Date	Action
Initial Creation Date	09/08/2023	New Policy
Revised Date	12/17/2024	Updated template and verified links
Revised Date	04/10/2025	Updated template and verified links
Revised Date	08/08/2025	Updated template and verified links
Revised Date	08/20/2025	Added page number; aligned bullet points; changed Coding Disclaimer from 9 point to 10 point.

References

This policy was developed using:

- CMS
- State Medicaid Regulatory Guidance
- State Contracts

Reference	Link
CMS	LCD - Pulmonary Stress Testing (L33444)
	Article - Billing and Coding: Pulmonary Stress Testing (A56784)
	NCD - Postural Drainage Procedures and Pulmonary Exercises (240.7)

***CODING DISCLAIMER.** Codes listed in this policy are for reference purposes only and may not be all-inclusive. Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement. Listing of a service or device code in this policy does guarantee coverage. Coverage is determined by the benefit document. Molina adheres to Current Procedural Terminology (CPT®), a registered trademark of the American Medical Association (AMA). All CPT codes and descriptions are copyrighted by the AMA; this information is included for informational purposes only. Providers and facilities are expected to utilize industry standard coding practices for all submissions. When improper billing and coding is not followed, Molina has the right to reject/deny the claim and recover claim payment(s). Due to changing industry practices, Molina reserves the right to revise this policy as needed.