

DOCUMENTATION CHECKLIST FOR NEBULIZERS AND RESPIRATORY DRUGS

Policy References:

- Local Coverage Determination (LCD) (L33370)
- Policy Article (A52466)

Documentation References: Standard Documentation Requirements Policy Article (A55426)

The supplier must be able to provide all of these items on request:

Standard Written Order (SWO)

Beneficiary Authorization

Proof of Delivery (POD)

Continued Need

Continued Use

Medical records from treating practitioner as noted below

Medical records should contain:

Small Volume Nebulizers (A7003, A7004, A7005), Related Compressor (E0570), and FDA-Approved Inhalation Drugs

Medical records support the medical necessity to administer one of the following inhalation drugs for one of the listed conditions:

Drug	HCPCS	Covered Condition (see LCD for ICD-10 Codes)
Albuterol	J7611, J7613	Obstructive pulmonary disease
Arformoterol	J7605	Obstructive pulmonary disease
Budesonide	J7626	Obstructive pulmonary disease
Cromolyn	J7631	Obstructive pulmonary disease
Formoterol	J7606	Obstructive pulmonary disease
Ipratropium	J7644	Obstructive pulmonary disease
Levalbuterol	J7612, J7614	Obstructive pulmonary disease
Metaproterenol	J7669	Obstructive pulmonary disease
Revefenacin	J7677	Obstructive pulmonary disease



Drug	HCPCS	Covered Condition (see LCD for ICD-10 Codes)
Dornase Alpha	J7639	Cystic fibrosis
Tobramycin	J7682	Cystic fibrosis or Bronchiectasis
Pentamidine	J2545	Human Immunodeficiency Virus (HIV), Pneumocystosis or complications of organ transplant
Acetylcysteine	J7608	Persistent thick or tenacious pulmonary secretions

Large Volume Nebulizer (A7007, A7017), Related Compressor (E0565, E0572), and Water or Saline (A4217, A7018).

Note: Combination code E0585 covered for the same indications

Medical records support the medical necessity to deliver humidity to beneficiary with thick, tenacious secretions due to (See Policy Article for ICD-10 codes):

Cystic fibrosis

Bronchiectasis

Tracheostomy

Tracheobronchial Stent

Filtered Nebulizer (A7006) and Compressor (E0565, E0572)

Medical records support the medical necessity to deliver pentamidine (J2545) to beneficiaries with (See Policy Article for ICD-10 codes):

HIV

Pneumocystosis

Complications of organ transplant

Small Volume Ultrasonic Nebulizer (E0574) and Treprostinil (J7686) or Controlled Dose Inhalation Drug Delivery system (K0730) and Iloprost (Q4074)

Medical records support the delivery of treprostinil (J7686) or iloprost (Q4074) to beneficiaries who meet the following criteria (See Policy Article for ICD codes):



Beneficiary has a diagnosis of pulmonary artery hypertension; and

Pulmonary hypertension is not secondary to pulmonary venous hypertension or disorders of the respiratory system; **and**

Beneficiary has primary pulmonary hypertension or pulmonary hypertension which is secondary to one of the following conditions:

Connective tissue disease; or

Thromboembolic disease of the pulmonary arteries; or

HIV infection; or

Cirrhosis; or

Anorexigens (diet drugs); or

Congenital left to right shunts; and

If one of the above conditions is present, the following must also be met:

Pulmonary hypertension has progressed despite maximal medical and/or surgical treatment of the identified condition; and

Mean pulmonary artery pressure is > 25 mm Hg at rest or > 30 mm Hg with exertion; and

Beneficiary has significant symptoms from the pulmonary hypertension (i.e., severe dyspnea on exertion, and either fatigability, angina, or syncope); **and**

Treatment with oral calcium channel blocking agents has been tried and failed or has been considered and ruled out.