

**Montana Medicaid - Fee Schedule  
Respiratory  
January 1, 2013**

**Definitions:**

**Modifier** – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

For example:

26 = professional component

TC = technical component

**Description** – Procedure code short description. You must refer to the appropriate official CPT-4, HCPCS or CDT-5 coding manual for complete definitions in order to assure correct coding.

**Effective** – This is the first date of service for which the listed fee is applicable. Fees for drugs, radiopharmaceuticals, blood products, immune globins, vaccines, and toxoids are reviewed and updated quarterly -- effective dates that are greater than three months old indicate that there has been no fee change since that date.

**Method** – Source of fee determination

**Fee Sched:** Medicaid fee; not determined using RBRVS payment schedule

**Medicare:** Medicare-prevailing fee.

**By Report (BR):** Equals 46% of billed charges. (Physician administered drugs will be priced by NDC if no rate is present.)

**Anes Value:** Number of anesthesia base value units. This is added to the 15 min. time increment units and multiplied by the anesthesia conversion factor of \$27.55.

**RBRVS:** Based on Medicare Relative Value Units (RVU's) x Montana Medicaid conversion factor x policy adjuster. Conversion factor for fiscal year 2013 is \$31.86

**\*If a valid, current code is not present, that code may be a non-covered service**

**Fees** The facility rate is paid to physicians/practitioners providing services in the following sites: hospitals, emergency rooms, ambulatory surgery centers, IHS provider based and IHS 638 free standing facilities, skilled nursing and nursing facilities, hospice, ambulance, inpatient psychiatric and partial psychiatric hospitals, psychiatric residential treatment centers, comprehensive inpatient rehab facilities, birthing centers and military treatment facilities. All other sites of service receive the office rate. Procedures not normally done in the office are shown with the same facility rate, while those done in both locations have different rates. Bundled services, which are covered but paid as part of a related service, are shown with an RBRVS method and a fee of \$0.00. Policy adjustments are applied to certain codes to increase or decrease reimbursement for the service. Vaccines covered by the Vaccines for Children (VFC) program are not reimbursable for individuals under 19. Please refer to the Medicaid Provider website for the list of VFC vaccines.

**Global Days** – Global surgery indicator. Global surgery periods are pre- and post-operative time frames assigned to surgical procedures.

**000:** Same day as procedure

**010:** Same day and ten days following procedure

**090:** One day prior to and ninety days following procedure

**MMM:** In maternity cases, the global period is per the CPT-4 code description

**ZZZ:** Add-on code, global period does not apply. An add-on code must be billed with its associated primary code

**Space:** Global concept does not apply to this code

**PA** – Prior Authorization

**Y:** Prior authorization is required

**Space** - this indicator does not apply to this code

**Indicators**

**Mult** - Multiple surgery guidelines do apply

**Bilat** - Bilateral. The procedure can be done bilaterally

**Assist** - Assistant. An assistant is allowed for this procedure

**Co-Surg** - Co-Surgery. A co-surgeon is allowed for this procedure

**Team** - A team of surgeons is allowed for this procedure

**Y** - indicator is applicable to this code

**Space** - this indicator does not apply to this code

**Policy Adjust** - M = Maternity, F = Family Planning

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Proc	Mod	Description	Effective	Method	Office	Facility	Days	PA	Mult	Bilat	Assist	CoSurg	Team	Adjust
G0237		THERAPEUTIC PROCD STRG ENDUR	7/1/2012	RBRVS	\$9.59	\$9.59								
G0238		OTH RESP PROC, INDIV	7/1/2012	RBRVS	\$10.23	\$10.23								
G0239		OTH RESP PROC, GROUP	7/1/2012	RBRVS	\$11.82	\$11.82								
31502		CHANGE OF WINDPIPE AIRWAY	7/1/2012	RBRVS	\$33.04	\$33.04	000		Y					
31720		CLEARANCE OF AIRWAYS	7/1/2012	RBRVS	\$48.36	\$48.36	000		Y					
31725		CLEARANCE OF AIRWAYS	7/1/2012	RBRVS	\$89.24	\$89.24	000		Y					
36600		WITHDRAWAL OF ARTERIAL BLOOD	7/1/2012	RBRVS	\$29.09	\$14.43			Y					
82800		BLOOD PH	1/1/2012	MEDICARE	\$19.98	\$0.00								
82803		BLOOD GASES ANY COMBINATION	1/1/2012	MEDICARE	\$45.67	\$0.00								
90700		DTAP VACCINE > 7 YRS IM	7/1/2010	FEE SCHED	\$0.00	\$0.00								
90702		DT VACCINE > 7 YRS IM	4/1/2012	FEE SCHED	\$21.15	\$0.00								
90703		TETANUS VACCINE IM	1/1/2013	FEE SCHED	\$35.41	\$0.00								
90704		MUMPS VACCINE SC	7/1/2010	FEE SCHED	\$20.30	\$0.00								
90705		MEASLES VACCINE SC	7/1/2010	FEE SCHED	\$17.22	\$0.00								
90706		RUBELLA VACCINE SC	7/1/2010	FEE SCHED	\$17.87	\$0.00								
90707		MMR VACCINE SC	4/1/2012	FEE SCHED	\$52.07	\$0.00								
90713		POLIOVIRUS IPV SC/IM	4/1/2012	FEE SCHED	\$26.66	\$0.00								
90716		CHICKEN POX VACCINE SC	4/1/2012	FEE SCHED	\$87.09	\$0.00								
90720		DTP/HIB VACCINE IM	4/1/2012	FEE SCHED	\$39.93	\$0.00								
90721		DTAP/HIB VACCINE IM	4/1/2012	FEE SCHED	\$39.93	\$0.00								
90723		DTAP-HEP B-IPV VACCINE IM	7/1/2004	FEE SCHED	\$70.72	\$0.00								
90735		ENCEPHALITIS VACCINE SC	1/1/2010	FEE SCHED	\$102.08	\$0.00								
90740		HEPB VACC ILL PAT 3 DOSE IM	1/1/2011	FEE SCHED	\$106.85	\$0.00								
90743		HEP B VACC ADOL 2 DOSE IM	1/1/2011	FEE SCHED	\$21.67	\$0.00								
90744		HEPB VACC PED/ADOL 3 DOSE IM	1/1/2012	FEE SCHED	\$21.67	\$0.00								
90746		HEP B VACCINE ADULT IM	1/1/2011	FEE SCHED	\$53.42	\$0.00								
90747		HEPB VACC ILL PAT 4 DOSE IM	1/1/2011	FEE SCHED	\$106.85	\$0.00								
90748		HEP B/HIB VACCINE IM	5/1/2005	BY REPORT	\$0.00	\$0.00								
92950		HEART/LUNG RESUSCITATION CPR	7/1/2012	RBRVS	\$279.19	\$172.78	000							
94010		BREATHING CAPACITY TEST	7/1/2012	RBRVS	\$33.84	\$33.84								
94010	TC	BREATHING CAPACITY TEST	7/1/2012	RBRVS	\$26.16	\$26.16								
94010	26	BREATHING CAPACITY TEST	7/1/2012	RBRVS	\$7.68	\$7.68								
94060		EVALUATION OF WHEEZING	7/1/2012	RBRVS	\$57.09	\$57.09								
94060	TC	EVALUATION OF WHEEZING	7/1/2012	RBRVS	\$45.27	\$45.27								
94060	26	EVALUATION OF WHEEZING	7/1/2012	RBRVS	\$11.82	\$11.82								
94070		EVALUATION OF WHEEZING	7/1/2012	RBRVS	\$57.16	\$57.16								
94070	TC	EVALUATION OF WHEEZING	7/1/2012	RBRVS	\$30.30	\$30.30								
94070	26	EVALUATION OF WHEEZING	7/1/2012	RBRVS	\$26.86	\$26.86								
94150		VITAL CAPACITY TEST	9/1/2011	RBRVS	\$0.00	\$0.00								
94150	TC	VITAL CAPACITY TEST	9/1/2011	RBRVS	\$0.00	\$0.00								
94150	26	VITAL CAPACITY TEST	9/1/2011	RBRVS	\$0.00	\$0.00								
94200		LUNG FUNCTION TEST (MBC/MVV)	7/1/2012	RBRVS	\$23.64	\$23.64								
94200	TC	LUNG FUNCTION TEST (MBC/MVV)	7/1/2012	RBRVS	\$18.51	\$18.51								
94200	26	LUNG FUNCTION TEST (MBC/MVV)	7/1/2012	RBRVS	\$5.13	\$5.13								
94250		EXPIRED GAS COLLECTION	7/1/2012	RBRVS	\$24.91	\$24.91								
94250	TC	EXPIRED GAS COLLECTION	7/1/2012	RBRVS	\$19.79	\$19.79								

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94250	26	EXPIRED GAS COLLECTION	7/1/2012	RBRVS	\$5.13	\$5.13								
94375		RESPIRATORY FLOW VOLUME LOOP	7/1/2012	RBRVS	\$36.70	\$36.70								
94375	TC	RESPIRATORY FLOW VOLUME LOOP	7/1/2012	RBRVS	\$22.97	\$22.97								
94375	26	RESPIRATORY FLOW VOLUME LOOP	7/1/2012	RBRVS	\$13.73	\$13.73								
94400		CO2 BREATHING RESPONSE CURVE	7/1/2012	RBRVS	\$53.27	\$53.27								
94400	TC	CO2 BREATHING RESPONSE CURVE	7/1/2012	RBRVS	\$35.72	\$35.72								
94400	26	CO2 BREATHING RESPONSE CURVE	7/1/2012	RBRVS	\$17.55	\$17.55								
94450		HYPOXIA RESPONSE CURVE	7/1/2012	RBRVS	\$59.96	\$59.96								
94450	TC	HYPOXIA RESPONSE CURVE	7/1/2012	RBRVS	\$42.09	\$42.09								
94450	26	HYPOXIA RESPONSE CURVE	7/1/2012	RBRVS	\$17.87	\$17.87								
94620		PULMONARY STRESS TEST/SIMPLE	7/1/2012	RBRVS	\$56.20	\$56.20								
94620	TC	PULMONARY STRESS TEST/SIMPLE	7/1/2012	RBRVS	\$27.75	\$27.75								
94620	26	PULMONARY STRESS TEST/SIMPLE	7/1/2012	RBRVS	\$28.45	\$28.45								
94640		AIRWAY INHALATION TREATMENT	7/1/2012	RBRVS	\$16.60	\$16.60								
94642		AEROSOL INHALATION TREATMENT	7/1/2003	BY REPORT	\$0.00	\$0.00								
94660		POS AIRWAY PRESSURE, CPAP	7/1/2012	RBRVS	\$57.19	\$34.89								
94662		NEG PRESS VENTILATION, CNP	7/1/2012	RBRVS	\$33.93	\$33.93								
94664		AEROSOL OR VAPOR INHALATIONS	7/1/2012	RBRVS	\$15.96	\$15.96								
94667		CHEST WALL MANIPULATION	7/1/2012	RBRVS	\$22.65	\$22.65								
94668		CHEST WALL MANIPULATION	7/1/2012	RBRVS	\$22.33	\$22.33								
94680		EXHALED AIR ANALYSIS, O2	7/1/2012	RBRVS	\$55.82	\$55.82								
94680	TC	EXHALED AIR ANALYSIS, O2	7/1/2012	RBRVS	\$44.00	\$44.00								
94680	26	EXHALED AIR ANALYSIS, O2	7/1/2012	RBRVS	\$11.82	\$11.82								
94681		EXHALED AIR ANALYSIS, O2/CO2	7/1/2012	RBRVS	\$50.72	\$50.72								
94681	TC	EXHALED AIR ANALYSIS, O2/CO2	7/1/2012	RBRVS	\$41.77	\$41.77								
94681	26	EXHALED AIR ANALYSIS, O2/CO2	7/1/2012	RBRVS	\$8.95	\$8.95								
94690		EXHALED AIR ANALYSIS	7/1/2012	RBRVS	\$48.81	\$48.81								
94690	TC	EXHALED AIR ANALYSIS	7/1/2012	RBRVS	\$45.27	\$45.27								
94690	26	EXHALED AIR ANALYSIS	7/1/2012	RBRVS	\$3.54	\$3.54								
94750		PULMONARY COMPLIANCE STUDY	7/1/2012	RBRVS	\$74.93	\$74.93								
94750	TC	PULMONARY COMPLIANCE STUDY	7/1/2012	RBRVS	\$64.71	\$64.71								
94750	26	PULMONARY COMPLIANCE STUDY	7/1/2012	RBRVS	\$10.23	\$10.23								
94760		MEASURE BLOOD OXYGEN LEVEL	9/1/2011	RBRVS	\$0.00	\$0.00								
94761		MEASURE BLOOD OXYGEN LEVEL	9/1/2011	RBRVS	\$0.00	\$0.00								
94762		MEASURE BLOOD OXYGEN LEVEL	7/1/2012	RBRVS	\$14.37	\$14.37								
94770		EXHALED CARBON DIOXIDE TEST	7/1/2012	RBRVS	\$14.75	\$14.75								
94772		BREATH RECORDING, INFANT	7/1/2003	BY REPORT	\$0.00	\$0.00								
94772	TC	BREATH RECORDING, INFANT	7/1/2003	BY REPORT	\$0.00	\$0.00								
94772	26	BREATH RECORDING, INFANT	7/1/2003	BY REPORT	\$0.00	\$0.00								