

## Spirometry Evaluation

### Coding Specifications

Codes required to document patient has chronic obstructive pulmonary disease (COPD) and a visit occurred:

A line item ICD-9-CM diagnosis code for COPD and a CPT E/M service code are required to identify patients to be included in this measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

#### COPD line item ICD-9-CM diagnosis codes

- 491.0, 491.1 (chronic bronchitis),
- 491.20, 491.21, 491.22 (obstructive chronic bronchitis),
- 491.8 (other chronic bronchitis),
- 491.9 (unspecified chronic bronchitis),
- 492.0, 492.8 (emphysema),
- 496 (chronic airway obstruction, not elsewhere classified)

AND

#### CPT E/M service codes

- 99201, 99202, 99203, 99204, 99205 (office — new patient),
- 99212, 99213, 99214, 99215 (office — established patient),
- 99241, 99242, 99243, 99244, 99245 (outpatient consult)

Quality codes for this measure:

#### CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- **CPT II 3023F:** Spirometry results documented and reviewed
- **CPT II 3023F-1P:** Documentation of medical reason(s) for not documenting and reviewing spirometry results
- **CPT II 3023F-2P:** Documentation of patient reason(s) for not documenting and reviewing spirometry results
- **CPT II 3023F-3P:** Documentation of system reason(s) for not documenting and reviewing spirometry results
- **CPT II 3023F-8P:** Spirometry results not documented and reviewed, reason not otherwise specified

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