

PULMONARY SERVICES

ISSUE DATE: April 19, 1983

AUTHORITY: [32 CFR 199.4\(b\)\(2\)\(xviii\)](#)

I. CPT¹ PROCEDURE CODES

94002 - 94005, 94010 - 94799

II. DESCRIPTION

Services provided for the diagnosis or treatment of conditions involving the lungs.

III. POLICY

A. Pulmonary services including pulmonary services provided as part of a treatment program on an inpatient or outpatient basis are covered.

B. For an indication to be covered the efficacy of the pulmonary services must be proven.

NOTE: Examples of proven indications are: cardiopulmonary or pulmonary rehabilitation for pre- and post-lung transplant patients when preauthorized by the appropriate preauthorizing authority as outlined in the Policy on heart-lung and lung transplantation; effective September 13, 1999, severe Chronic Obstructive Pulmonary Disease (COPD) on an inpatient basis; and moderate and severe COPD on an outpatient basis.

- END -

¹ CPT only © 2006 American Medical Association (or such other date of publication of CPT). All Rights Reserved.

