Important Notice Regarding Allergy Services

Blue Cross and Blue Shield of Texas (BCBSTX) expects all providers to follow Current Procedural Terminology (CPT®) manual specifications for the diagnosis, treatment and management of all services provided, including all supporting and supplemental guides, and that care be reflected by appropriate documentation in the patient's medical record.

Specific to allergy testing and treatment services (CPT codes 95004 and 95165), please see below:

- **CPT code 95004** is defined as "Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, including test interpretation and report by a physician, specify number of tests." (2013, AMA CPT Professional Edition, p. 529) A physician may delegate, with appropriate supervision, the performance of certain procedures and/or components of procedures for efficient use of physician, staff and patient time. Although a physician may delegate certain physical tasks of allergy testing, the definition of 95004 requires the physician to personally review the allergy test results -- either by inspecting the test site(s) on the patient or analyzing a detailed report of the objective test findings. Then, using this personal test result review and taking the patient’s full medical history (including known allergies and occurrence of allergy-related conditions such as rhinitis and sinusitis) into account, the physician decides if the patient is an appropriate candidate for immunotherapy. This personal review and determination should be documented in the patient’s medical record to fully satisfy the “report” requirements of this code.

- **CPT Code 95165** is defined as “Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; single or multiple antigens (specify number of doses).” (2013, AMA CPT Professional Edition, p. 531) A physician may delegate, with appropriate supervision, the performance of certain procedures and/or components of procedures for efficient use of physician, staff and patient time. A physician may delegate the tasks of physical antigen/serum mixing, patient instruction for serum injection, and providing serum vials to the patient. However, after determining a patient is an appropriate candidate for immunotherapy (as described above) the physician must personally select the allergens for immunotherapy, determine the specific concentrations and dilutions, and order the specific shot schedule. The physicians must also personally monitor the patient’s progress throughout the course of immunotherapy and not merely delegate that responsibility to ancillary (third party vendor) personnel.

In addition, BCBSTX limits payment for allergy serum to the **amount actually provided to the patient on a given date of service** but no more than 60 units per two (2) months. This policy does not apply to rapid desensitization.

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