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**Medicare Advantage Policy Manual** 

# Measurement of Exhaled Breath Condensate in the Diagnosis and Management of Respiratory Disorders

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#### IMPORTANT REMINDER

The Medicare Advantage Medical Policy manual is not intended to override the member Evidence of Coverage (EOC), which defines the insured's benefits, nor is it intended to dictate how providers are to practice medicine. Physicians and other health care providers are expected to exercise their medical judgment in providing the most appropriate care for the individual member.

The Medicare Advantage Medical Policies are designed to provide guidance regarding the decision-making process for the coverage or non-coverage of services or procedures in accordance with the member EOC and the Centers of Medicare and Medicaid Services (CMS) policies, when available. In the event of a conflict, applicable CMS policy or EOC language will take precedence over the Medicare Advantage Medical Policy. In the absence of CMS guidance for a requested service or procedure, the health plan may apply their Medical Policy Manual or MCG<sup>TM</sup> criteria, both of which are developed with an objective, evidence-based process using scientific evidence, current generally accepted standards of medical practice, and authoritative clinical practice guidelines.

Medicare and EOCs exclude from coverage, among other things, services or procedures considered to be investigational, cosmetic, or not medically necessary, and in some cases, providers may bill members for these non-covered services or procedures. Providers are encouraged to inform members in advance when they may be financially responsible for the cost of non-covered or excluded services.

### **DESCRIPTION**

The measurement of exhaled breath condensate (EBC) is being evaluated for diagnosing and managing asthma, chronic obstructive pulmonary disease (COPD), chronic cough, and other respiratory disorders.

MEDICARE ADVANTAGE POLICY CRITERIA		
CMS Coverage Manuals*	None	
National Coverage Determinations (NCDs)*	None	
Noridian Healthcare Solutions (Noridian) Local	None	

## Coverage Determinations (LCDs) and Articles\*

### **Medical Policy Manual**

Medicare coverage guidance is not available for measurement of exhaled breath condensate. Therefore, the health plan's medical policy is applicable.

Measurement of Exhaled Breath Condensate in the Diagnosis and Management of Respiratory Disorders, Medicine, Policy No. 108 (see "NOTE" below)

NOTE: If a procedure or device lacks scientific evidence regarding safety and efficacy because it is investigational or experimental, the service is noncovered as not reasonable and necessary to treat illness or injury. (Medicare IOM Pub. No. 100-04, Ch. 23, §30 A). According to Title XVIII of the Social Security Act, §1862(a)(1)(A), only medically reasonable and necessary services are covered by Medicare. In the absence of a NCD, LCD, or other coverage guideline, CMS guidelines allow a Medicare Advantage Organization (MAO) to make coverage determinations, applying an **objective**, **evidence-based process**, **based on authoritative evidence**. (Medicare IOM Pub. No. 100-16, Ch. 4, §90.5). The Medicare Advantage Medical Policy - Medicine Policy No. M-149 - provides further details regarding the plan's evidence-assessment process (see Cross References).

### **POLICY GUIDELINES**

N/A

### **CROSS REFERENCES**

Investigational (Experimental) Services, New and Emerging Medical Technologies and Procedures, and Other Non-Covered Services, Medicine, Policy No. M-149

### REFERENCES

None

CODING		
Codes	Number	Description
CPT	83987	pH, Exhaled breath condensate
HCPCS	None	

\*IMPORTANT NOTE: Medicare Advantage medical policies use the most current Medicare references available at the time the policy was developed. Links to Medicare references will take viewers to external websites outside of the health plan's web control as these sites are not maintained by the health plan.