

DME MAC Jurisdiction A

Nebulizers - Documentation Guidance [\(SPE\)](#)

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The Nebulizers local coverage determination (LCD) stipulates that for coverage of long-acting beta agonist (LABA) formulations the following criterion must be met:

It is medically necessary to administer formoterol (J7606) or arformoterol (J7605) for the management of chronic obstructive pulmonary disease (ICD-9 diagnosis codes 491.0-492.8, 496) and the patient has a documented history of routine use of at least four doses per day of an FDA-approved albuterol or metaproterenol inhalation solution or at least three doses per day of an FDA-approved levalbuterol inhalation solution.

Suppliers have inquired about how to document the “history of routine use” and the time required to be on a short acting beta agonist (SABA) before converting to formoterol or arformoterol. The supplier’s records should reflect that the beneficiary has used SABA therapy at the frequencies listed in the coverage criteria for a period of three (3) months.

Suppliers should refer to the Nebulizer LCD for further information about coverage, coding and documentation requirements.