

Guidelines for the Evaluation by Payors of Claims Submitted Using CPT Codes 95165, 95115, AND 95117

The ACAAI, AAAAI, and AAOA recognize payors have a right to take reasonable steps to make sure claims by physicians for payment for services are (a) for medically necessary services that were performed for the patient and (b) are properly coded. To improve efficiency and reduce unnecessary burdens on practices, the following are our recommendations for reasonable and unreasonable documentation requests for 95165, 95115, and 95117:

95165

Reasonable Requests for Documentation

1. The identity of the physician who established the treatment plan.
2. The identity of the patient and a short description of the clinical indications for allergen immunotherapy.
3. A brief description of the treatment plan and the date on which it was formulated.
4. A description of the response to allergy immunotherapy and the need for continued allergen immunotherapy at routine visits.
5. A signed and dated order for allergen extract listing the allergy extract ingredients, concentrations (AU, BAU, W/V), volumes of extract, and diluent (cc or ml).
6. The initials of the allergen extract compounding healthcare professional.

Unreasonable Requests

1. A requirement that allergy extracts billed under 95165 be based on a volume of 1 ml. or some other insurer-specific maximum.
2. Adhering to MUE limits or insurer-specific unit maxima. Instead, respect the dosage determined by the physician.
3. Compounding logs for each **build-up dose**, including lot numbers.
4. Results of allergy skin testing.
5. Multiple audit requests or claim reviews.

95115 and 95117

Reasonable Requests for Documentation

1. The date of the injection, the patient's name, and birth date.
2. The dose administered, specifying volume, strength, and number of injections.
3. The site(s) of the injection, e.g. right arm.
4. The initials or signature of the person administering the injection (whether actual or electronically).

Unreasonable Requests

1. Date of vial expiration/"best use by".
2. Full planned dosing schedule.
3. Specification of subcutaneous administration.
4. Signature of ordering healthcare professional.
5. Credentials of the person administering the injection.
6. A history of previous injections.
7. Multiple audit requests or claim reviews.

Allergists can use these published guidelines in several ways: reference them in appeals, use them in communications and/or meetings with payers, and share them with local and regional allergy societies.

Sources: [Annals of Allergy, Asthma & Immunology, Guidelines for the evaluation by payors of claims submitted using CPT codes 95165, 95115, and 95117](#); [Annals of Allergy, Asthma & Immunology, Clarification regarding terminology in "Guidance for evaluation by payors of claims submitted using CPT codes"](#)