

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 code 95165), please see below:

- CPT Code 95165 is defined as “*Antigen Therapy Services*” (2019, American Medical Association CPT Professional Edition, p. 694). 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 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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