2010 CPT® Codes for Cardiac Device Monitoring
<table>
<thead>
<tr>
<th>CPT Code</th>
<th>CPT Code Description</th>
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<tbody>
<tr>
<td><strong>IMPLANTABLE PACEMAKER</strong></td>
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</table>
| 93288 | **Interrogation** device evaluation (in person) with physician analysis, review and report, includes connection, recording and disconnection per patient encounter; single, dual, or multiple lead **pacemaker** system  
(Do not report 93288 in conjunction with 93279-93281, 93286, 93294, 93296) |
| 93279 | **Programming** device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with physician analysis, review and report; **single** lead **pacemaker** system  
(Do not report 93279 in conjunction with 93286, 93288) |
| 93280 | **Programming** device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with physician analysis, review and report; **dual** lead **pacemaker** system  
(Do not report 93280 in conjunction with 93286, 93288) |
| 93281 | **Programming** device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with physician analysis, review and report; **multiple** lead **pacemaker** system  
(Do not report 93281 in conjunction with 93286, 93288) |
| 93296 | **Interrogation** device evaluation(s) (remote), up to 90 days; single, dual, or multiple lead **pacemaker** system or implantable cardioverter-defibrillator system, remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results  
(Do not report 93296 in conjunction with 93288, 93289, 93299)  
(Report 93296 only once per 90 days) |
| 93294 | **Interrogation** device evaluation(s) (remote), up to 90 days; single, dual, or multiple lead **pacemaker** system with interim **physician** analysis, review(s) and report(s)  
(Do not report 93294 in conjunction with 93288, 93293)  
(Report 93294 only once per 90 days) |
| 93293 | **Transtelephonic** rhythm strip **pacemaker** evaluation(s) single, dual, or multiple lead pacemaker system, includes recording with and without magnet application with physician analysis, review and report(s), up to 90 days  
(Do not report 93293 in conjunction with 93294)  
(For in person evaluation, see 93040, 93041, 93042)  
(Report 93293 only once per 90 days) |
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<tr>
<td><strong>IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR</strong></td>
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| 93289 | **Interrogation** device evaluation (in person) with physician analysis, review and report, includes connection, recording and disconnection per patient encounter; single, dual, or multiple lead implantable cardioverter-defibrillator system, including analysis of heart rhythm derived data elements  
(For monitoring physiologic cardiovascular data elements derived from an ICD, use 93290)  
(Do not report 93289 in conjunction with 93282-93284, 93287, 93295, 93296) |
| 93282 | **Programming** device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with physician analysis, review and report; single lead implantable cardioverter-defibrillator system  
(Do not report 93282 in conjunction with 93287, 93289, 93745) |
| 93283 | **Programming** device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with physician analysis, review and report; dual lead implantable cardioverter-defibrillator system  
(Do not report 93283 in conjunction with 93287, 93289) |
| 93284 | **Programming** device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with physician analysis, review and report; multiple lead implantable cardioverter-defibrillator system  
(Do not report 93284 in conjunction with 93287, 93289) |
| 93295 | **Interrogation** device evaluation(s) (remote), up to 90 days; single, dual, or multiple lead implantable cardioverter-defibrillator system with interim physician analysis, review(s) and report(s)  
(For remote monitoring of physiologic cardiovascular data elements derived from an ICD, use 93297)  
(Do not report 93295 in conjunction with 93289)  
(Report 93295 only once per 90 days) |
| 93296 | **Interrogation** device evaluation(s) (remote), up to 90 days; single, dual, or multiple lead pacemaker system or implantable cardioverter-defibrillator system, remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results  
(Do not report 93296 in conjunction with 93288, 93289, 93299)  
(Report 93296 only once per 90 days) |
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<tr>
<td><strong>IMPLANTABLE CARDIOVASCULAR MONITOR</strong></td>
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| 93290 | Interrogation device evaluation *(in person)* with *physician* analysis, review and report, includes connection, recording and disconnection per patient encounter; *implantable cardiovascular monitor* system, including analysis of 1 or more recorded physiologic cardiovascular data elements from all internal and external sensors  
(For heart rhythm derived data elements, use 93289)  
(Do not report 93290 in conjunction with 93297, 93299) |
| 93297 | Interrogation device evaluation(s), *(remote)* up to 30 days; *implantable cardiovascular monitor* system, including analysis of 1 or more recorded physiologic cardiovascular data elements from all internal and external sensors, *physician* analysis, review(s) and report(s)  
(For heart rhythm derived data elements, use 93295)  
(Do not report 93297 in conjunction with 93290, 93298)  
(Report 93297 only once per 30 days) |
| 93299 | Interrogation device evaluation(s), *(remote)* up to 30 days; *implantable cardiovascular monitor* system or *implantable loop recorder system*, remote data acquisition(s), receipt of transmissions and *technician* review, technical support and distribution of results  
(Do not report 93299 in conjunction with 93290, 93291, 93296)  
(Report 93299 only once per 30 days) |
| **IMPLANTABLE LOOP RECORDER** |
| 93285 | Programming device evaluation *(in person)* with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with physician analysis, review and report; *implantable loop recorder* system  
(Do not report 93285 in conjunction with 33282, 93279-93284, 93291) |
| 93291 | Interrogation device evaluation *(in person)* with *physician* analysis, review and report, includes connection, recording and disconnection per patient encounter; *implantable loop recorder* system, including heart rhythm derived data analysis  
(Do not report 93291 in conjunction with 33282, 93288-93290, 93298, 93299) |
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<tr>
<td><strong>IMPLANTABLE LOOP RECORDER (continued)</strong></td>
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| 93298 | **Interrogation** device evaluation(s), *(remote)* up to 30 days; implantable loop recorder system, including analysis of recorded heart rhythm data, **physician** analysis, review(s) and report(s)  
(Do not report 93298 in conjunction with 33282, 93291, 93297)  
(Report 93298 only once per 30 days) |
| 93299 | **Interrogation** device evaluation(s), *(remote)* up to 30 days; implantable cardiovascular monitor system or implantable loop recorder system, remote data acquisition(s), receipt of transmissions and **technician** review, technical support and distribution of results  
(Do not report 93299 in conjunction with 93290, 93291, 93296)  
(Report 93299 only once per 30 days) |
| **PERI-PROCEDURAL** |
| 93286 | **Peri-procedural** device evaluation *(in person)* and programming of device system parameters before or after a surgery, procedure, or test with physician analysis, review and report; single, dual, or multiple lead **pacemaker** system  
(Report 93286 once before and once after surgery, procedure, or test, when device evaluation and programming is performed before and after surgery, procedure, or test)  
(Do not report 93286 in conjunction with 93279-93281, 93288) |
| 93287 | **Peri-procedural** device evaluation *(in person)* and programming of device system parameters before or after a surgery, procedure, or test with physician analysis, review and report; single, dual, or multiple lead implantable **cardioverter-defibrillator** system  
(Report 93287 once before and once after surgery, procedure, or test, when device evaluation and programming is performed before and after surgery, procedure, or test)  
(Do not report 93287 in conjunction with 93282-93284, 93289) |
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<tr>
<td><strong>MOBILE CARDIOVASCULAR TELEMETRY</strong></td>
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<td>93228</td>
<td>Wearable mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; physician review and interpretation with report (Report 93228 only once per 30 days) (Do not report 93228 in conjunction with 93014)</td>
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<tr>
<td>93229</td>
<td>Wearable mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; technical support for connection and patient instructions for use, attended surveillance, analysis and physician prescribed transmission of daily and emergent data reports (Report 93229 only once per 30 days) (Do not report 93229 in conjunction with 93014) (For wearable cardiovascular monitors that do not perform automatic ECG triggered transmissions to an attended surveillance center, see 93224-93227, 93230-93272)</td>
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<tr>
<td><strong>WEARABLE CARDIOVERTER-DEFIBRILLATOR</strong></td>
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<tr>
<td>93292</td>
<td>Interrogation device evaluation (in person) with physician analysis, review and report, includes connection, recording and disconnection per patient encounter; wearable defibrillator system (Do not report 93292 in conjunction with 93745)</td>
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<tr>
<td>93745*</td>
<td>Initial set-up and programming by a physician of wearable cardioverter-defibrillator includes initial programming of system, establishing baseline electronic ECG, transmission of data to data repository, patient instruction in wearing system and patient reporting of problems or events (Do not report 93745 in conjunction with 93282, 93292)</td>
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* This code was created in 2005.
Additional Coding Information:

Medtronic has prepared this document to reflect the applicable cardiac device monitoring services since their implementation on January 1, 2009. It is important to refer to the CPT code descriptions in order to ensure that a billed code meets the specific requirements defined for each individual code. You should contact your local Medicare contractor/payer for interpretation of applicable policies.

The monitoring period described by these codes include an in person, 30-day, or a 90-day monitoring period. Remote monitoring codes have separate CPT codes for the professional and technical components.

For CPT codes other than for remote monitoring, the Global CPT codes comprise the Professional and Technical Components. If both components of care are rendered, it is not necessary to append a modifier to the code. However, the remote monitoring codes are an example of a global service that requires two different CPT codes to be billed together, as one code represents the Professional Service and another code represents the Technical Service (e.g., CPT 93294 and 93296, 93295 and 93296, 93297 and 93299, and 93298 and 93299).

The Professional Component reflects physician time and intensity in furnishing the service, including activities before and after direct patient contact. When only the professional component is performed, modifier –26 should be added to the appropriate CPT code to identify the service. The –26 modifier would not be appended if the code represents only the professional services of the CPT code description (e.g., CPT 93294, 93295, 93297, and 93298).

The Technical Component refers to the resources used in furnishing the service, such as office rent, wages of personnel, and other office practice expenses. When only the technical component is performed, the modifier –TC should be added to the appropriate CPT code to identify the service. The –TC modifier would not be appended if the code represents only the technical support and services component of the CPT code description (e.g., CPT 93296 and 93299).

Physician Supervision Requirements:

Medicare established specific diagnostic test supervision requirements applicable to the technical component of the electronic analysis of implanted cardiac devices. These supervision requirements are in addition to any other Medicare coverage requirements. The Medicare supervision requirements for individual CPT codes are available on the Physician Fee Schedule Lookup function on the Medicare website or under "PFS Relative Value Files" for 2010. Medicare requires:

- General supervision of the technical component for all remote interrogation services and transtelephonic pacemaker monitoring (codes 93296, 93299, and 93293)
- Direct supervision of the technical component for all in person cardiac device interrogations

Medicare has also indicated that the specific supervision requirements for device monitoring of implanted cardiac devices are inapplicable where the physician is eligible to bill a global CPT code, a CPT code with a professional component modifier (–26) or a specific code that represents the professional component (93294, 93295, 93297, and 93298) for their analysis.

General supervision means the procedure is furnished under the physician's overall direction and control, but the physician's presence is not required during the performance of the procedure. Under general supervision, the training of the non-physician personnel who actually performs the diagnostic procedure and the maintenance of the necessary equipment and supplies are the continuing responsibility of the physician.

Direct supervision means the physician must be present in the office suite and immediately available to furnish assistance and direction throughout the performance of the procedure. It does not mean that the physician must be present in the room when the procedure is performed.

The Heart Rhythm Society (HRS) released a document which represents their consensus statement on the role of manufacturers' representatives in the care of patients with heart rhythm disorders. This policy statement also contains HRS' perspective on appropriate delivery of and billing for the technical component of services associated with cardiac devices. We encourage providers to seek confirmation or clarification from the payer about the policy statement.

These coding suggestions do not replace seeking coding advice from the payer and/or your own coding staff. The ultimate responsibility for correct coding lies with the provider of services. Please contact your local payer for interpretation of the appropriate codes to use for specific procedures. Medtronic makes no guarantee that the use of this information will prevent differences of opinion or disputes with Medicare or other third party payers as to the correct form of billing or the amount that will be paid to providers of service.

For questions or for more information, please contact Medtronic at 1 (866) 877-4102, option 1.

Cardiac Rhythm Disease Management (CRDM) reimbursement customer information is available at www.medtronic.com.crdmreimbursement.
References

1 Social Security Act Section 1848(c) (1) (A) and (B).
2 Section 410.32(b) of the Code of Federal Regulations (CFR).
3 Medicare’s website is: http://www.cms.hhs.gov/PfsLookup/.
4 http://www.cms.hhs.gov/PhysicianFeeSched/PFSRVF/list.asp#TopOfPage, file
   PPRRVU10.
5 The Medicare Benefit Policy Manual, CMS-Pub. 100-02 Chapter 15, §80 –
   Covered Medical and Other Health Services indicates that the “concept does
   not apply.” This Policy Manual can be found at http://www.cms.hhs.gov/
   Manuals/IOM/list.asp.
6 Lindsay BD, Estes NA III, Maloney JD, Reynolds DW. Heart Rhythm Society Policy
   Statement Update: Recommendations on the Role of Industry Employed
   Allied Professionals (IEAPs). Heart Rhythm. November 2008;5(11):e8-10. This
   document can be found at: http://www.hrsonline.org/Policy/ClinicalGuidelines/
   updated_ieaps.cfm.