2017 PHYSICIAN PROCEDURES
Cardiac Rhythm and Heart Failure

Access your CPT codebook for additional coding information.
<table>
<thead>
<tr>
<th>CRT-D IMPLANT</th>
<th>EP IMPLANTABLE DEFIBRILLATOR DEVICE FOLLOW-UP</th>
<th>TRANSTHORACIC ECHOCARDIOGRAPHY</th>
<th>CARDOVERSION</th>
</tr>
</thead>
<tbody>
<tr>
<td>+33225</td>
<td>Insert LV lead at time of generator implant</td>
<td>93642*</td>
<td>EP evaluation transvenous single/dual implantable defibrillator</td>
</tr>
<tr>
<td>33230</td>
<td>Insert implantable defibrillator generator only; w/existing dual leads</td>
<td>93644*</td>
<td>EP evaluation subcutaneous implantable defibrillator</td>
</tr>
<tr>
<td>33231</td>
<td>Insert implantable defibrillator generator only; w/existing multiple leads</td>
<td>93303*</td>
<td>Echo transthoracic, congenital; complete</td>
</tr>
<tr>
<td>33240</td>
<td>Insert implantable defibrillator generator only; w/existing single lead</td>
<td>93304*</td>
<td>Echo transthoracic, congenital; follow-up or limited study</td>
</tr>
<tr>
<td>33249</td>
<td>Insert or replace pacem implantable defibrillator system with transvenous (leads); single or dual chamber</td>
<td>93306*</td>
<td>Echo transthoracic 2D, complete w/spectral and color flow Doppler</td>
</tr>
<tr>
<td>33263</td>
<td>Remove implantable defibrillator generator w/replacement of implantable-defibrillator generator; dual lead system</td>
<td>93307*</td>
<td>Echo transthoracic 2D, complete w/spectral or color flow Doppler</td>
</tr>
<tr>
<td>33264</td>
<td>Remove implantable defibrillator generator w/replacement of implantable-defibrillator generator; multiple lead system</td>
<td>93308*</td>
<td>Echo transthoracic 2D, follow-up or limited study</td>
</tr>
<tr>
<td>93641*</td>
<td>Test device/leads at initial implant or replacement</td>
<td>+93320*</td>
<td>Doppler pulsed and/or continuous wave with spectral display, complete</td>
</tr>
</tbody>
</table>

**COMPREHENSIVE EP EVALUATIONS**

- 93619* | Comp EP eval; RA and RV pacing/recording/His |
- 93620* | Comp EP eval/w/arrhythmia; RA and RV pacing/recording/His |
- +93621* | Comp EP eval/w/arrhythmia; LA pacing/recording from CS or LA |
- +93622* | Comp EP eval/w/arrhythmia; LV pacing/recording |
- +93623* | Programmed stimulation and pacing after IV drug infusion |

**RECORDING, MAPPING, AND OTHER PROCEDURES**

- 93600* | Bundle of His recording |
- 93602* | Intra-atrial recording |
- 93603* | Right ventricular recording |
- +93609* | Intravenous and/or intra-atrial mapping of tachycardia |
- 93610* | Intra-atrial pacing |
- 93612* | Intraventricular pacing |
- +93613 | Intracardiac electrophysiologic 3D mapping |
- 93615* | Esophageal recording of atrial electrogram |
- 93616* | Esophageal recording of atrial electrogram w/pacing |
- 93618* | Induction of arrhythmia by electrical pacing |
- 93624* | EP follow-up w/pacing/recording/w/induction or attempted induction of arrhythmia |
- 93631* | Intra-operative epicardial/endocardial pacing/mapping |
- 93660* | Tilt table evaluation |

**CATHETER ABLATIONS**

(Review your CPT codebook for the applicable Add-on codes)

- +93462 | Left heart catheterization by transseptal puncture |
- 93650 | Catheter ablation AV node with or w/o temporary pacemaker |
- 93653 | EPS with RA pacing/recording, RV pacing/recording (when necessary), and His recording (when necessary) with catheter ablation of arrhythmogenic focus; with treatment of SVT |
- 93654 | EPS with RA pacing/recording, RV pacing/recording (when necessary), and His recording (when necessary) with catheter ablation of arrhythmogenic focus; with treatment of VT including 3D mapping, when performed, and LV pacing/recording, when performed |
- +93655 | Catheter ablation of a discrete mechanism of arrhythmia which is distinct from the primary ablated mechanism, including repeat diagnostic maneuvers, to treat a spontaneous or induced arrhythmia (Use 93655 in conjunction with 93653, 93654, 93656) |
- 93656 | EPS including transseptal catheterizations, with LA or RA pacing/ recording, when necessary, RV pacing/recording when necessary, and His bundle recording when necessary with catheter ablation of AF by PVI |
- +93662 | Intracardiac echo during intervention/includes imaging |
- +93675 | Additional linear or focal catheter ablation of the left or right atrium for treatment of atrial fibrillation remaining after completion of pulmonary vein isolation (Use 93675 in conjunction with 93665) |

**CARDIOVERSION**

- 92960 | Cardioversion, elective, conversion of arrhythmia, external |
- 92961 | Cardioversion, elective, conversion of arrhythmia, internal |

**COMMONLY USED MODIFIERS**

- 99240 | No additional procedure or service by the same physician or other qualified health care professional during the postoperative period |
- 99250 | Additional procedure or service by the same physician or other qualified health care professional following initial procedure for a related procedure |
- 99260 | Unplanned return to the OR/procedure room by the same physician or other qualified health care professional following initial procedure for a related procedure |
- 99262 | Increased procedural services (work required to provide a service is substantially greater than typically required) |
- 99264 | Significant, separately identifiable E/M service by the same physician or other qualified health care professional on the same day of the procedure or other service |
- 99266 | Reduced services |
- 99268 | Discontinued procedure (physician or other qualified health care professional elects to terminate a surgical or diagnostic procedure) |
- 99270 | Staged or related procedures or service by the same physician or other qualified health care professional during the postoperative period |
- 99272 | Repeat procedure or service by same physician or other qualified health care professional |
- 99274 | Repeat procedure by another physician or other qualified health care professional |
- 99276 | Unplanned return to the OR/procedure room by the same physician or other qualified health care professional following initial procedure for a related procedure |
- 99278 | Unrelated procedure or service by the same physician or other qualified health care professional during the postoperative period |

**NOTES:**

Codes preceded by a + symbol are add-on codes; bill in addition to the primary service/procedure.

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