

Long-Term Wearable Electrocardiographic Monitoring

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[↪ Terms and Conditions](#)

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Policy Summary

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Overview

Long-term wearable electrocardiographic monitoring is a diagnostic procedure that provides a record of the heart rhythm during daily activities, including sleep. This procedure can often identify the existence and determine the frequency of clinically significant rhythm disturbances and waveform abnormalities that are missed on a standard electrocardiogram (ECG).

Guidelines

Non-Activated Continuous Recorders (Holter Monitor/External Electrocardiographic Recording)

Indications for external 48-hour ECG recording include one or more of the following:

- Symptoms:
 - Arrhythmias
 - Chest pain
 - Syncope (lightheadedness) or near syncope
 - Vertigo (dizziness)
 - Palpitations
 - Transient ischemic episodes
 - Dyspnea (shortness of breath)
- Evaluation of the response to antiarrhythmic drug therapy;
- Evaluation of myocardial infarction (MI) survivors;
- Assessment of patients with coronary artery disease with active symptoms, to correlate chest pain with ST-segment changes;
- Other acute and subacute forms of ischemic heart disease;
- To detect arrhythmias post ablation procedures.

The use of external electrocardiographic recording for greater than 48 hours and up to 7 days or for greater than 7 days up to 15 days by continuous rhythm recording and storage, may be considered medically necessary in patients treated for reasons listed in the diagnosis list to monitor for asymptomatic episodes in order to evaluate treatment response. The use of external electrocardiographic event monitors for greater than 48 hours and up to 7 days or for greater than 7 days up to 15 days that are

either patient-activated or auto-activated may be considered medically necessary as a diagnostic alternative to Holter monitoring in patients who experience infrequent symptoms (less frequently than every 48 hours) suggestive of cardiac arrhythmias (i.e., palpitations, dizziness, presyncope, or syncope).

Patient/Event-Activated Intermittent Recorders (Loop Event Monitors, Remote Cardiovascular Monitoring)

Ambulatory outpatient cardiac telemetry (outpatient cardiac monitoring) services are included among the cardiac event detection type of ambulatory EKG monitoring services.

Cardiac Event Detection (CED) involves the use of a long-term monitor by patients to document a suspected or paroxysmal dysrhythmia. The device must be patient or event activated.

Cardiac event detection is covered for:

- Detection, characterization, and documentation of symptomatic transient arrhythmias, when the frequency of the symptoms is limited and use of a 24-hour ambulatory EKG is unlikely to capture and document the arrhythmia;
- Regulation of antiarrhythmic drug dosages;
- To monitor patients who have had surgical or ablative procedures for arrhythmias.

Although the service is a 30-day service, it is recognized that the event recorder may be discontinued once the symptom-producing arrhythmia has been documented and diagnosed or following multiple transmissions during symptoms, without arrhythmia. It is unlikely that the arrhythmias would always be diagnosed on the first day of recording, or that the service would always last only one day. The average duration of monitoring is anticipated to last 10-14 days, or more.

Limitations

The use of multiple forms of cardiac surveillance services (e.g., Holter monitor, other event recorder) provided to the same patient on the same day is not medically necessary.

A CED service is medically unnecessary if it offers little or no potential for new clinical data beyond that which has been obtained from a previous test (e.g., a standard electrocardiogram has already established a diagnosis) or if other tests are better suited to obtain the clinical data relevant to the patient's condition. The CED should be coordinated with results from standard EKGs, Holter monitor tests, and stress tests.

The receiving station must be staffed on a 24-hour basis and should be able to direct the patient for the management of all emergencies. An answering service/answering machine would not fulfill this requirement.

Event recorders may not use time-sampling technology. Accordingly, this test will be considered medically unnecessary for any patient who is unresponsive, comatose, severely confused or otherwise unable to recognize symptoms, or activate the recorder (patient activated devices) or unable to participate in the use of the device.

Documentation Guidelines

Documentation should include a history and physical exam. The record should document the evaluation, which focuses on the cause(s) of the presenting symptoms and/or the need for this testing. Some examples are:

- The patient record has an evaluation and management service that documents the symptoms experienced by the patient.
- The patient has had a full workup in the past month with initial tests performed, and presents with continuing symptoms that indicate the need for up to 48 hour monitoring or long-term monitoring.
- The CED provider's records must include the referring physician's request for the test and the indications for the test.
- Documentation of necessity should include the referring physician's diagnostic impression and an indication of relevant signs and symptoms.

All documentation must be maintained in the patient's medical record and available upon request.

Applicable Codes

The following list(s) of codes is provided for reference purposes only and may not be all inclusive. Listing of a code in this guideline does not imply that the service described by the code is a covered or non-covered health service. Benefit coverage for health services is determined by the member specific benefit plan document and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other Policies and Guidelines may apply.

CPT Code	Description
External Electrocardiographic Recording	
0295T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation (Deleted 12/31/2020 – See 93241, 93245)
0296T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; recording (includes connection and initial recording) (Deleted 12/31/2020 – See 93242, 93246)
0297T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; scanning analysis with report (Deleted 12/31/2020 – See 93243, 93247)
0298T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; review and interpretation (Deleted 12/31/2020 – See 93244, 93248)
93241	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation (Effective 01/01/2021)
93242	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; recording (includes connection and initial recording) (Effective 01/01/2021)
93243	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; scanning analysis with report (Effective 01/01/2021)
93244	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; review and interpretation (Effective 01/01/2021)
93245	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation (Effective 01/01/2021)
93246	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; recording (includes connection and initial recording) (Effective 01/01/2021)
93247	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; scanning analysis with report (Effective 01/01/2021)
93248	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; review and interpretation (Effective 01/01/2021)
Holter Monitor	
93224	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation by a physician or other qualified health care professional
93225	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; recording (includes connection, recording, and disconnection)
93226	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; scanning analysis with report
93227	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; review and interpretation by a physician or other qualified health care professional

CPT Code	Description
Outpatient Cardiac Telemetry	
93228	External 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; review and interpretation with report by a physician or other qualified health care professional
93229	External 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 transmission of daily and emergent data reports as prescribed by a physician or other qualified health care professional
Memory Loop Event Monitor	
93268	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; includes transmission, review and interpretation by a physician or other qualified health care professional
93270	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; recording (includes connection, recording, and disconnection)
93271	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; transmission and analysis
93272	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; review and interpretation by a physician or other qualified health care professional

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Diagnosis Code	Description
For CPT Codes 93228 and 93229	
G45.0	Vertebro-basilar artery syndrome
G45.1	Carotid artery syndrome (hemispheric)
G45.2	Multiple and bilateral precerebral artery syndromes
G45.3	Amaurosis fugax
G45.4	Transient global amnesia
G45.8	Other transient cerebral ischemic attacks and related syndromes
G45.9	Transient cerebral ischemic attack, unspecified
I20.0	Unstable angina
I20.1	Angina pectoris with documented spasm
I20.8	Other forms of angina pectoris
I20.9	Angina pectoris, unspecified
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery

Diagnosis Code	Description
For CPT Codes 93228 and 93229	
I21.29	ST elevation (STEMI) myocardial infarction involving other sites
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site
I21.4	Non-ST elevation (NSTEMI) myocardial infarction
I21.9	Acute myocardial infarction, unspecified
I21.A1	Myocardial infarction type 2
I21.A9	Other myocardial infarction type
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site
I24.0	Acute coronary thrombosis not resulting in myocardial infarction
I24.1	Dressler's syndrome
I24.8	Other forms of acute ischemic heart disease
I24.9	Acute ischemic heart disease, unspecified
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris
I25.2	Old myocardial infarction
I25.3	Aneurysm of heart
I25.41	Coronary artery aneurysm
I25.5	Ischemic cardiomyopathy
I25.6	Silent myocardial ischemia
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris

Diagnosis Code	Description
For CPT Codes 93228 and 93229	
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris
I25.84	Coronary atherosclerosis due to calcified coronary lesion
I25.89	Other forms of chronic ischemic heart disease
I25.9	Chronic ischemic heart disease, unspecified
I31.0	Chronic adhesive pericarditis
I31.1	Chronic constrictive pericarditis
I34.0	Nonrheumatic mitral (valve) insufficiency
I34.1	Nonrheumatic mitral (valve) prolapse
I34.2	Nonrheumatic mitral (valve) stenosis
I34.8	Other nonrheumatic mitral valve disorders
I34.9	Nonrheumatic mitral valve disorder, unspecified
I42.0	Dilated cardiomyopathy
I42.1	Obstructive hypertrophic cardiomyopathy
I42.2	Other hypertrophic cardiomyopathy
I42.3	Endomyocardial (eosinophilic) disease
I42.4	Endocardial fibroelastosis
I42.5	Other restrictive cardiomyopathy
I42.6	Alcoholic cardiomyopathy
I42.7	Cardiomyopathy due to drug and external agent
I42.8	Other cardiomyopathies

Diagnosis Code	Description
For CPT Codes 93228 and 93229	
I42.9	Cardiomyopathy, unspecified
I43	Cardiomyopathy in diseases classified elsewhere
I44.0	Atrioventricular block, first degree
I44.1	Atrioventricular block, second degree
I44.2	Atrioventricular block, complete
I44.30	Unspecified atrioventricular block
I44.39	Other atrioventricular block
I44.4	Left anterior fascicular block
I44.5	Left posterior fascicular block
I44.60	Unspecified fascicular block
I44.69	Other fascicular block
I44.7	Left bundle-branch block, unspecified
I45.0	Right fascicular block
I45.10	Unspecified right bundle-branch block
I45.19	Other right bundle-branch block
I45.2	Bifascicular block
I45.3	Trifascicular block
I45.4	Nonspecific intraventricular block
I45.5	Other specified heart block
I45.6	Pre-excitation syndrome
I45.81	Long QT syndrome
I45.89	Other specified conduction disorders
I45.9	Conduction disorder, unspecified
I46.2	Cardiac arrest due to underlying cardiac condition
I46.8	Cardiac arrest due to other underlying condition
I46.9	Cardiac arrest, cause unspecified
I47.0	Re-entry ventricular arrhythmia
I47.1	Supraventricular tachycardia
I47.2	Ventricular tachycardia
I47.9	Paroxysmal tachycardia, unspecified
I48.0	Paroxysmal atrial fibrillation
I48.1	Persistent atrial fibrillation (Deleted 09/30/2019)
I48.11	Longstanding persistent atrial fibrillation (Effective 10/01/2019)
I48.19	Other persistent atrial fibrillation (Effective 10/01/2019)
I48.2	Chronic atrial fibrillation (Deleted 09/30/2019)
I48.20	Chronic atrial fibrillation, unspecified (Effective 10/01/2019)
I48.21	Permanent atrial fibrillation (Effective 10/01/2019)
I48.3	Typical atrial flutter
I48.4	Atypical atrial flutter
I48.91	Unspecified atrial fibrillation
I48.92	Unspecified atrial flutter

Diagnosis Code	Description
For CPT Codes 93228 and 93229	
I49.01	Ventricular fibrillation
I49.02	Ventricular flutter
I49.1	Atrial premature depolarization
I49.2	Junctional premature depolarization
I49.3	Ventricular premature depolarization
I49.40	Unspecified premature depolarization
I49.49	Other premature depolarization
I49.5	Sick sinus syndrome
I49.8	Other specified cardiac arrhythmias
I49.9	Cardiac arrhythmia, unspecified
I51.7	Cardiomegaly
I51.9	Heart disease, unspecified
I52	Other heart disorders in diseases classified elsewhere
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery (Effective 03/26/2020)
I63.111	Cerebral infarction due to embolism of right vertebral artery (Effective 03/26/2020)
I63.112	Cerebral infarction due to embolism of left vertebral artery (Effective 03/26/2020)
I63.113	Cerebral infarction due to embolism of bilateral vertebral arteries (Effective 03/26/2020)
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery (Effective 03/26/2020)
I63.12	Cerebral infarction due to embolism of basilar artery (Effective 03/26/2020)
I63.131	Cerebral infarction due to embolism of right carotid artery (Effective 03/26/2020)
I63.132	Cerebral infarction due to embolism of left carotid artery (Effective 03/26/2020)
I63.133	Cerebral infarction due to embolism of bilateral carotid arteries (Effective 03/26/2020)
I63.139	Cerebral infarction due to embolism of unspecified carotid artery (Effective 03/26/2020)
I63.19	Cerebral infarction due to embolism of other precerebral artery (Effective 03/26/2020)
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery
I63.411	Cerebral infarction due to embolism of right middle cerebral artery
I63.412	Cerebral infarction due to embolism of left middle cerebral artery
I63.413	Cerebral infarction due to embolism of bilateral middle cerebral arteries
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery
I63.423	Cerebral infarction due to embolism of bilateral anterior cerebral arteries
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery
I63.433	Cerebral infarction due to embolism of bilateral posterior cerebral arteries
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery
I63.441	Cerebral infarction due to embolism of right cerebellar artery
I63.442	Cerebral infarction due to embolism of left cerebellar artery
I63.443	Cerebral infarction due to embolism of bilateral cerebellar arteries
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery

Diagnosis Code	Description
For CPT Codes 93228 and 93229	
I63.49	Cerebral infarction due to embolism of other cerebral artery
I63.89	Other cerebral infarction
I67.841	Reversible cerebrovascular vasoconstriction syndrome
I67.848	Other cerebrovascular vasospasm and vasoconstriction
I67.850	Cerebral autosomal dominant arteriopathy with subcortical infarcts and leukoencephalopathy
I67.858	Other hereditary cerebrovascular disease
I97.0	Postcardiotomy syndrome
I97.110	Postprocedural cardiac insufficiency following cardiac surgery
I97.111	Postprocedural cardiac insufficiency following other surgery
I97.120	Postprocedural cardiac arrest following cardiac surgery
I97.121	Postprocedural cardiac arrest following other surgery
I97.130	Postprocedural heart failure following cardiac surgery
I97.131	Postprocedural heart failure following other surgery
I97.190	Other postprocedural cardiac functional disturbances following cardiac surgery
I97.191	Other postprocedural cardiac functional disturbances following other surgery
R00.0	Tachycardia, unspecified
R00.1	Bradycardia, unspecified
R00.2	Palpitations
R06.00	Dyspnea, unspecified
R06.01	Orthopnea
R06.02	Shortness of breath
R06.03	Acute respiratory distress
R06.09	Other forms of dyspnea
R06.1	Stridor
R06.2	Wheezing
R06.3	Periodic breathing
R06.4	Hyperventilation
R06.81	Apnea, not elsewhere classified
R06.82	Tachypnea, not elsewhere classified
R06.83	Snoring
R06.89	Other abnormalities of breathing
R07.2	Precordial pain
R07.82	Intercostal pain
R07.89	Other chest pain
R07.9	Chest pain, unspecified
R29.5	Transient paralysis
R40.4	Transient alteration of awareness
R42	Dizziness and giddiness
R55	Syncope and collapse
T46.0x5A	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, initial encounter
T46.0X5D	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, subsequent encounter

Diagnosis Code	Description
For CPT Codes 93228 and 93229	
T46.0x5S	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, sequela
T46.1x5A	Adverse effect of calcium-channel blockers, initial encounter
T46.1X5D	Adverse effect of calcium-channel blockers, subsequent encounter
T46.1x5S	Adverse effect of calcium-channel blockers, sequela
T46.2x5A	Adverse effect of other antidysrhythmic drugs, initial encounter
T46.2X5D	Adverse effect of other antidysrhythmic drugs, subsequent encounter
T46.2x5S	Adverse effect of other antidysrhythmic drugs, sequela
T46.905A	Adverse effect of unspecified agents primarily affecting the cardiovascular system, initial encounter
T46.905S	Adverse effect of unspecified agents primarily affecting the cardiovascular system, sequela
T46.995A	Adverse effect of other agents primarily affecting the cardiovascular system, initial encounter
T46.995S	Adverse effect of other agents primarily affecting the cardiovascular system, sequela
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
Z51.81	Encounter for therapeutic drug monitoring (Deleted 02/25/2018)
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy
Z86.73	Personal history of transient ischemic attack (TIA), and cerebral infarction without residual deficits (Effective 03/26/2020)
Z95.0	Presence of cardiac pacemaker
Z95.810	Presence of automatic (implantable) cardiac defibrillator
Z95.818	Presence of other cardiac implants and grafts
Z95.9	Presence of cardiac and vascular implant and graft, unspecified
For CPT Codes 93268, 93270, 93271, and 93272	
G45.0	Vertebro-basilar artery syndrome
G45.1	Carotid artery syndrome (hemispheric)
G45.2	Multiple and bilateral precerebral artery syndromes
G45.3	Amaurosis fugax
G45.4	Transient global amnesia
G45.8	Other transient cerebral ischemic attacks and related syndromes
G45.9	Transient cerebral ischemic attack, unspecified
I20.0	Unstable angina
I20.1	Angina pectoris with documented spasm
I20.8	Other forms of angina pectoris
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery
I21.29	ST elevation (STEMI) myocardial infarction involving other sites
I21.4	Non-ST elevation (NSTEMI) myocardial infarction

Diagnosis Code	Description
For CPT Codes 93268, 93270, 93271, and 93272	
I21.9	Acute myocardial infarction, unspecified
I21.A1	Myocardial infarction type 2
I21.A9	Other myocardial infarction type
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites
I24.0	Acute coronary thrombosis not resulting in myocardial infarction
I24.1	Dressler's syndrome
I24.8	Other forms of acute ischemic heart disease
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris
I25.2	Old myocardial infarction
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm

Diagnosis Code	Description
For CPT Codes 93268, 93270, 93271, and 93272	
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris
I25.82	Chronic total occlusion of coronary artery
I44.0	Atrioventricular block, first degree
I44.1	Atrioventricular block, second degree
I44.2	Atrioventricular block, complete
I44.30	Unspecified atrioventricular block
I44.39	Other atrioventricular block
I44.4	Left anterior fascicular block
I44.5	Left posterior fascicular block
I44.69	Other fascicular block
I44.7	Left bundle-branch block, unspecified
I45.0	Right fascicular block
I45.19	Other right bundle-branch block
I45.2	Bifascicular block
I45.3	Trifascicular block
I45.4	Nonspecific intraventricular block
I45.5	Other specified heart block
I45.6	Pre-excitation syndrome
I45.81	Long QT syndrome
I45.89	Other specified conduction disorders
I45.9	Conduction disorder, unspecified
I46.2	Cardiac arrest due to underlying cardiac condition
I46.8	Cardiac arrest due to other underlying condition
I46.9	Cardiac arrest, cause unspecified
I47.0	Re-entry ventricular arrhythmia
I47.1	Supraventricular tachycardia
I47.2	Ventricular tachycardia
I47.9	Paroxysmal tachycardia, unspecified
I48.0	Paroxysmal atrial fibrillation
I48.1	Persistent atrial fibrillation (Deleted 09/30/2019)
I48.11	Longstanding persistent atrial fibrillation (Effective 10/01/2019)
I48.19	Other persistent atrial fibrillation (Effective 10/01/2019)
I48.2	Chronic atrial fibrillation (Deleted 09/30/2019)
I48.20	Chronic atrial fibrillation, unspecified (Effective 10/01/2019)
I48.21	Permanent atrial fibrillation (Effective 10/01/2019)
I48.3	Typical atrial flutter
I48.4	Atypical atrial flutter
I48.91	Unspecified atrial fibrillation
I48.92	Unspecified atrial flutter
I49.01	Ventricular fibrillation
I49.02	Ventricular flutter

Diagnosis Code	Description
For CPT Codes 93268, 93270, 93271, and 93272	
I49.1	Atrial premature depolarization
I49.2	Junctional premature depolarization
I49.3	Ventricular premature depolarization
I49.40	Unspecified premature depolarization
I49.49	Other premature depolarization
I49.5	Sick sinus syndrome
I49.8	Other specified cardiac arrhythmias
I49.9	Cardiac arrhythmia, unspecified
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery (Effective 03/26/2020)
I63.111	Cerebral infarction due to embolism of right vertebral artery (Effective 03/26/2020)
I63.112	Cerebral infarction due to embolism of left vertebral artery (Effective 03/26/2020)
I63.113	Cerebral infarction due to embolism of bilateral vertebral arteries (Effective 03/26/2020)
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery (Effective 03/26/2020)
I63.12	Cerebral infarction due to embolism of basilar artery (Effective 03/26/2020)
I63.131	Cerebral infarction due to embolism of right carotid artery (Effective 03/26/2020)
I63.132	Cerebral infarction due to embolism of left carotid artery (Effective 03/26/2020)
I63.133	Cerebral infarction due to embolism of bilateral carotid arteries (Effective 03/26/2020)
I63.139	Cerebral infarction due to embolism of unspecified carotid artery (Effective 03/26/2020)
I63.19	Cerebral infarction due to embolism of other precerebral artery (Effective 03/26/2020)
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery
I63.411	Cerebral infarction due to embolism of right middle cerebral artery
I63.412	Cerebral infarction due to embolism of left middle cerebral artery
I63.413	Cerebral infarction due to embolism of bilateral middle cerebral arteries
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery
I63.423	Cerebral infarction due to embolism of bilateral anterior cerebral arteries
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery
I63.433	Cerebral infarction due to embolism of bilateral posterior cerebral arteries
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery
I63.441	Cerebral infarction due to embolism of right cerebellar artery
I63.442	Cerebral infarction due to embolism of left cerebellar artery
I63.443	Cerebral infarction due to embolism of bilateral cerebellar arteries
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery
I63.49	Cerebral infarction due to embolism of other cerebral artery
I63.89	Other cerebral infarction
I67.841	Reversible cerebrovascular vasoconstriction syndrome
I67.848	Other cerebrovascular vasospasm and vasoconstriction
I67.850	Cerebral autosomal dominant arteriopathy with subcortical infarcts and leukoencephalopathy

Diagnosis Code	Description
For CPT Codes 93268, 93270, 93271, and 93272	
I67.858	Other hereditary cerebrovascular disease
R00.0	Tachycardia, unspecified
R00.1	Bradycardia, unspecified
R00.2	Palpitations
R06.00	Dyspnea, unspecified
R06.01	Orthopnea
R06.02	Shortness of breath
R06.03	Acute respiratory distress
R06.09	Other forms of dyspnea
R06.1	Stridor
R06.2	Wheezing
R06.3	Periodic breathing
R06.4	Hyperventilation
R06.81	Apnea, not elsewhere classified
R06.82	Tachypnea, not elsewhere classified
R06.83	Snoring
R06.89	Other abnormalities of breathing
R07.2	Precordial pain
R07.82	Intercostal pain
R07.89	Other chest pain
R07.9	Chest pain, unspecified
R29.5	Transient paralysis
R40.4	Transient alteration of awareness
R42	Dizziness and giddiness
R55	Syncope and collapse
T46.0x5A	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, initial encounter
T46.0X5D	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, subsequent encounter
T46.0x5S	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, sequela
T46.1x5A	Adverse effect of calcium-channel blockers, initial encounter
T46.1X5D	Adverse effect of calcium-channel blockers, subsequent encounter
T46.1x5S	Adverse effect of calcium-channel blockers, sequela
T46.2x5A	Adverse effect of other antidysrhythmic drugs, initial encounter
T46.2X5D	Adverse effect of other antidysrhythmic drugs, subsequent encounter
T46.2x5S	Adverse effect of other antidysrhythmic drugs, sequela
T46.905A	Adverse effect of unspecified agents primarily affecting the cardiovascular system, initial encounter
T46.905S	Adverse effect of unspecified agents primarily affecting the cardiovascular system, sequela
T46.995A	Adverse effect of other agents primarily affecting the cardiovascular system, initial encounter
T46.995S	Adverse effect of other agents primarily affecting the cardiovascular system, sequela
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
Z79.891	Long term (current) use of opiate analgesic

Diagnosis Code	Description
For CPT Codes 93268, 93270, 93271, and 93272	
Z79.899	Other long term (current) drug therapy
Z86.73	Personal history of transient ischemic attack (TIA), and cerebral infarction without residual deficits (Effective 03/26/2020)
Z86.74	Personal history of sudden cardiac arrest
For CPT Codes 93224, 93225, 93226, and 93227	
G45.0	Vertebro-basilar artery syndrome
G45.1	Carotid artery syndrome (hemispheric)
G45.2	Multiple and bilateral precerebral artery syndromes
G45.3	Amaurosis fugax
G45.4	Transient global amnesia
G45.8	Other transient cerebral ischemic attacks and related syndromes
G45.9	Transient cerebral ischemic attack, unspecified
I20.0	Unstable angina
I20.1	Angina pectoris with documented spasm
I20.8	Other forms of angina pectoris
I20.9	Angina pectoris, unspecified
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery
I21.29	ST elevation (STEMI) myocardial infarction involving other sites
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site
I21.4	Non-ST elevation (NSTEMI) myocardial infarction
I21.9	Acute myocardial infarction, unspecified
I21.A1	Myocardial infarction type 2
I21.A9	Other myocardial infarction type
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site
I24.0	Acute coronary thrombosis not resulting in myocardial infarction
I24.1	Dressler's syndrome
I24.8	Other forms of acute ischemic heart disease
I24.9	Acute ischemic heart disease, unspecified
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris

Diagnosis Code	Description
For CPT Codes 93224, 93225, 93226, and 93227	
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris
I25.2	Old myocardial infarction
I25.3	Aneurysm of heart
I25.41	Coronary artery aneurysm
I25.5	Ischemic cardiomyopathy
I25.6	Silent myocardial ischemia
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris
I25.730	Atherosclerosis of non-autologous biological coronary artery bypass graft(s) with unstable angina pectoris
I25.731	Atherosclerosis of non-autologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.738	Atherosclerosis of non-autologous biological coronary artery bypass graft(s) with other forms of angina pectoris
I25.739	Atherosclerosis of non-autologous biological coronary artery bypass graft(s) with unspecified angina pectoris
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris

Diagnosis Code	Description
For CPT Codes 93224, 93225, 93226, and 93227	
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris
I25.84	Coronary atherosclerosis due to calcified coronary lesion
I25.89	Other forms of chronic ischemic heart disease
I25.9	Chronic ischemic heart disease, unspecified
I31.0	Chronic adhesive pericarditis
I31.1	Chronic constrictive pericarditis
I34.0	Non-rheumatic mitral (valve) insufficiency
I34.1	Non-rheumatic mitral (valve) prolapse
I34.2	Non-rheumatic mitral (valve) stenosis
I34.8	Other nonrheumatic mitral valve disorders
I34.9	Non-rheumatic mitral valve disorder, unspecified
I42.0	Dilated cardiomyopathy
I42.1	Obstructive hypertrophic cardiomyopathy
I42.2	Other hypertrophic cardiomyopathy
I42.3	Endomyocardial (eosinophilic) disease
I42.4	Endocardial fibroelastosis
I42.5	Other restrictive cardiomyopathy
I42.6	Alcoholic cardiomyopathy
I42.7	Cardiomyopathy due to drug and external agent
I42.8	Other cardiomyopathies
I42.9	Cardiomyopathy, unspecified
I43	Cardiomyopathy in diseases classified elsewhere
I44.0	Atrioventricular block, first degree
I44.1	Atrioventricular block, second degree
I44.2	Atrioventricular block, complete
I44.30	Unspecified atrioventricular block (Deleted 06/19/2020)
I44.39	Other atrioventricular block
I44.4	Left anterior fascicular block
I44.5	Left posterior fascicular block
I44.60	Unspecified fascicular block
I44.69	Other fascicular block
I44.7	Left bundle-branch block, unspecified
I45.0	Right fascicular block
I45.10	Unspecified right bundle-branch block
I45.19	Other right bundle-branch block
I45.2	Bifascicular block
I45.3	Trifascicular block
I45.4	Nonspecific intraventricular block
I45.5	Other specified heart block

Diagnosis Code	Description
For CPT Codes 93224, 93225, 93226, and 93227	
I45.6	Pre-excitation syndrome
I45.81	Long QT syndrome
I45.89	Other specified conduction disorders
I45.9	Conduction disorder, unspecified
I46.2	Cardiac arrest due to underlying cardiac condition
I46.8	Cardiac arrest due to other underlying condition
I46.9	Cardiac arrest, cause unspecified
I47.0	Re-entry ventricular arrhythmia
I47.1	Supraventricular tachycardia
I47.2	Ventricular tachycardia
I47.9	Paroxysmal tachycardia, unspecified
I48.0	Paroxysmal atrial fibrillation
I48.1	Persistent atrial fibrillation (Deleted 09/30/2019)
I48.11	Longstanding persistent atrial fibrillation (Effective 10/01/2019)
I48.19	Other persistent atrial fibrillation (Effective 10/01/2019)
I48.2	Chronic atrial fibrillation (Deleted 09/30/2019)
I48.20	Chronic atrial fibrillation, unspecified (Effective 10/01/2019)
I48.21	Permanent atrial fibrillation (Effective 10/01/2019)
I48.3	Typical atrial flutter
I48.4	Atypical atrial flutter
I48.91	Unspecified atrial fibrillation
I48.92	Unspecified atrial flutter
I49.01	Ventricular fibrillation
I49.02	Ventricular flutter
I49.1	Atrial premature depolarization
I49.2	Junctional premature depolarization
I49.3	Ventricular premature depolarization
I49.40	Unspecified premature depolarization (Deleted 06/19/2020)
I49.49	Other premature depolarization
I49.5	Sick sinus syndrome
I49.8	Other specified cardiac arrhythmias
I49.9	Cardiac arrhythmia, unspecified
I51.7	Cardiomegaly
I51.9	Heart disease, unspecified
I52	Other heart disorders in diseases classified elsewhere
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery (Effective 03/26/2020)
I63.111	Cerebral infarction due to embolism of right vertebral artery (Effective 03/26/2020)
I63.112	Cerebral infarction due to embolism of left vertebral artery (Effective 03/26/2020)
I63.113	Cerebral infarction due to embolism of bilateral vertebral arteries (Effective 03/26/2020)
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery (Effective 03/26/2020)
I63.12	Cerebral infarction due to embolism of basilar artery (Effective 03/26/2020)

Diagnosis Code	Description
For CPT Codes 93224, 93225, 93226, and 93227	
I63.131	Cerebral infarction due to embolism of right carotid artery (Effective 03/26/2020)
I63.132	Cerebral infarction due to embolism of left carotid artery (Effective 03/26/2020)
I63.133	Cerebral infarction due to embolism of bilateral carotid arteries (Effective 03/26/2020)
I63.139	Cerebral infarction due to embolism of unspecified carotid artery (Effective 03/26/2020)
I63.19	Cerebral infarction due to embolism of other precerebral artery (Effective 03/26/2020)
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery (Effective 03/26/2020)
I63.411	Cerebral infarction due to embolism of right middle cerebral artery (Effective 03/26/2020)
I63.412	Cerebral infarction due to embolism of left middle cerebral artery (Effective 03/26/2020)
I63.413	Cerebral infarction due to embolism of bilateral middle cerebral arteries (Effective 03/26/2020)
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery (Effective 03/26/2020)
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery (Effective 03/26/2020)
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery (Effective 03/26/2020)
I63.423	Cerebral infarction due to embolism of bilateral anterior cerebral arteries (Effective 03/26/2020)
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery (Effective 03/26/2020)
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery (Effective 03/26/2020)
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery (Effective 03/26/2020)
I63.433	Cerebral infarction due to embolism of bilateral posterior cerebral arteries (Effective 03/26/2020)
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery (Effective 03/26/2020)
I63.441	Cerebral infarction due to embolism of right cerebellar artery (Effective 03/26/2020)
I63.442	Cerebral infarction due to embolism of left cerebellar artery (Effective 03/26/2020)
I63.443	Cerebral infarction due to embolism of bilateral cerebellar arteries (Effective 03/26/2020)
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery (Effective 03/26/2020)
I63.49	Cerebral infarction due to embolism of other cerebral artery (Effective 03/26/2020)
I97.0	Postcardiotomy syndrome
I97.110	Postprocedural cardiac insufficiency following cardiac surgery
I97.111	Postprocedural cardiac insufficiency following other surgery
I97.120	Postprocedural cardiac arrest following cardiac surgery
I97.121	Postprocedural cardiac arrest following other surgery
I97.130	Postprocedural heart failure following cardiac surgery
I97.131	Postprocedural heart failure following other surgery
I97.190	Other postprocedural cardiac functional disturbances following cardiac surgery
I97.191	Other postprocedural cardiac functional disturbances following other surgery
R00.0	Tachycardia, unspecified (Deleted 06/19/2020)
R00.1	Bradycardia, unspecified
R00.2	Palpitations
R06.01	Orthopnea
R06.02	Shortness of breath
R06.03	Acute respiratory distress
R06.09	Other forms of dyspnea
R06.2	Wheezing
R06.3	Periodic breathing

Diagnosis Code	Description
For CPT Codes 93224, 93225, 93226, and 93227	
R06.4	Hyperventilation
R06.81	Apnea, not elsewhere classified
R06.82	Tachypnea, not elsewhere classified
R06.83	Snoring
R06.89	Other abnormalities of breathing
R07.2	Precordial pain
R07.82	Intercostal pain
R07.89	Other chest pain
R07.9	Chest pain, unspecified
R29.5	Transient paralysis
R40.4	Transient alteration of awareness
R42	Dizziness and giddiness
R55	Syncope and collapse
T46.0X5A	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, initial encounter
T46.0X5D	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, subsequent encounter
T46.0X5S	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, sequela
T46.1X5A	Adverse effect of calcium-channel blockers, initial encounter
T46.1X5D	Adverse effect of calcium-channel blockers, subsequent encounter
T46.1X5S	Adverse effect of calcium-channel blockers, sequela
T46.2X5A	Adverse effect of other antidysrhythmic drugs, initial encounter
T46.2X5D	Adverse effect of other antidysrhythmic drugs, subsequent encounter
T46.2X5S	Adverse effect of other antidysrhythmic drugs, sequela
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy
Z86.73	Personal history of transient ischemic attack (TIA), and cerebral infarction without residual deficits (Effective 03/26/2020)
Z95.0	Presence of cardiac pacemaker
Z95.810	Presence of automatic (implantable) cardiac defibrillator
Z95.818	Presence of other cardiac implants and grafts
Z95.9	Presence of cardiac and vascular implant and graft, unspecified
For CPT Codes 93241, 93242, 93243, 93244, 93245, 93246, 93247, and 93248	
G45.0	Vertebro-basilar artery syndrome
G45.1	Carotid artery syndrome (hemispheric)
G45.2	Multiple and bilateral precerebral artery syndromes
G45.3	Amaurosis fugax
G45.4	Transient global amnesia
G45.8	Other transient cerebral ischemic attacks and related syndromes
G45.9	Transient cerebral ischemic attack, unspecified
I20.0	Unstable angina

Diagnosis Code	Description
For CPT Codes 93241, 93242, 93243, 93244, 93245, 93246, 93247, and 93248	
I20.1	Angina pectoris with documented spasm
I20.8	Other forms of angina pectoris
I20.9	Angina pectoris, unspecified
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery
I21.29	ST elevation (STEMI) myocardial infarction involving other sites
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site
I21.4	Non-ST elevation (NSTEMI) myocardial infarction
I21.9	Acute myocardial infarction, unspecified
I21.A1	Myocardial infarction type 2
I21.A9	Other myocardial infarction type
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site
I24.0	Acute coronary thrombosis not resulting in myocardial infarction
I24.1	Dressler's syndrome
I24.8	Other forms of acute ischemic heart disease
I24.9	Acute ischemic heart disease, unspecified
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris
I25.2	Old myocardial infarction
I25.3	Aneurysm of heart
I25.41	Coronary artery aneurysm
I25.5	Ischemic cardiomyopathy
I25.6	Silent myocardial ischemia
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris

Diagnosis Code	Description
For CPT Codes 93241, 93242, 93243, 93244, 93245, 93246, 93247, and 93248	
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris
I25.730	Atherosclerosis of non-autologous biological coronary artery bypass graft(s) with unstable angina pectoris
I25.731	Atherosclerosis of non-autologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.738	Atherosclerosis of non-autologous biological coronary artery bypass graft(s) with other forms of angina pectoris
I25.739	Atherosclerosis of non-autologous biological coronary artery bypass graft(s) with unspecified angina pectoris
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris
I25.84	Coronary atherosclerosis due to calcified coronary lesion
I25.89	Other forms of chronic ischemic heart disease
I25.9	Chronic ischemic heart disease, unspecified
I31.0	Chronic adhesive pericarditis
I31.1	Chronic constrictive pericarditis
I34.0	Non-rheumatic mitral (valve) insufficiency
I34.1	Non-rheumatic mitral (valve) prolapse
I34.2	Non-rheumatic mitral (valve) stenosis
I34.8	Other nonrheumatic mitral valve disorders

Diagnosis Code	Description
For CPT Codes 93241, 93242, 93243, 93244, 93245, 93246, 93247, and 93248	
I34.9	Non-rheumatic mitral valve disorder, unspecified
I42.0	Dilated cardiomyopathy
I42.1	Obstructive hypertrophic cardiomyopathy
I42.2	Other hypertrophic cardiomyopathy
I42.3	Endomyocardial (eosinophilic) disease
I42.4	Endocardial fibroelastosis
I42.5	Other restrictive cardiomyopathy
I42.6	Alcoholic cardiomyopathy
I42.7	Cardiomyopathy due to drug and external agent
I42.8	Other cardiomyopathies
I42.9	Cardiomyopathy, unspecified
I43	Cardiomyopathy in diseases classified elsewhere
I44.0	Atrioventricular block, first degree
I44.1	Atrioventricular block, second degree
I44.2	Atrioventricular block, complete
I44.30	Unspecified atrioventricular block
I44.39	Other atrioventricular block
I44.4	Left anterior fascicular block
I44.5	Left posterior fascicular block
I44.60	Unspecified fascicular block
I44.69	Other fascicular block
I44.7	Left bundle-branch block, unspecified
I45.0	Right fascicular block
I45.10	Unspecified right bundle-branch block
I45.19	Other right bundle-branch block
I45.2	Bifascicular block
I45.3	Trifascicular block
I45.4	Nonspecific intraventricular block
I45.5	Other specified heart block
I45.6	Pre-excitation syndrome
I45.81	Long QT syndrome
I45.89	Other specified conduction disorders
I45.9	Conduction disorder, unspecified
I46.2	Cardiac arrest due to underlying cardiac condition
I46.8	Cardiac arrest due to other underlying condition
I46.9	Cardiac arrest, cause unspecified
I47.0	Re-entry ventricular arrhythmia
I47.1	Supraventricular tachycardia
I47.2	Ventricular tachycardia
I47.9	Paroxysmal tachycardia, unspecified
I48.0	Paroxysmal atrial fibrillation

Diagnosis Code	Description
For CPT Codes 93241, 93242, 93243, 93244, 93245, 93246, 93247, and 93248	
I48.11	Longstanding persistent atrial fibrillation
I48.19	Other persistent atrial fibrillation
I48.20	Chronic atrial fibrillation, unspecified
I48.21	Permanent atrial fibrillation
I48.3	Typical atrial flutter
I48.4	Atypical atrial flutter
I48.91	Unspecified atrial fibrillation
I48.92	Unspecified atrial flutter
I49.01	Ventricular fibrillation
I49.02	Ventricular flutter
I49.1	Atrial premature depolarization
I49.2	Junctional premature depolarization
I49.3	Ventricular premature depolarization
I49.40	Unspecified premature depolarization
I49.49	Other premature depolarization
I49.5	Sick sinus syndrome
I49.8	Other specified cardiac arrhythmias
I49.9	Cardiac arrhythmia, unspecified
I51.7	Cardiomegaly
I51.9	Heart disease, unspecified
I52	Other heart disorders in diseases classified elsewhere
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery
I63.111	Cerebral infarction due to embolism of right vertebral artery
I63.112	Cerebral infarction due to embolism of left vertebral artery
I63.113	Cerebral infarction due to embolism of bilateral vertebral arteries
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery
I63.12	Cerebral infarction due to embolism of basilar artery
I63.131	Cerebral infarction due to embolism of right carotid artery
I63.132	Cerebral infarction due to embolism of left carotid artery
I63.133	Cerebral infarction due to embolism of bilateral carotid arteries
I63.139	Cerebral infarction due to embolism of unspecified carotid artery
I63.19	Cerebral infarction due to embolism of other precerebral artery
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery
I63.411	Cerebral infarction due to embolism of right middle cerebral artery
I63.412	Cerebral infarction due to embolism of left middle cerebral artery
I63.413	Cerebral infarction due to embolism of bilateral middle cerebral arteries
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery
I63.423	Cerebral infarction due to embolism of bilateral anterior cerebral arteries
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery

Diagnosis Code	Description
For CPT Codes 93241, 93242, 93243, 93244, 93245, 93246, 93247, and 93248	
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery
I63.433	Cerebral infarction due to embolism of bilateral posterior cerebral arteries
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery
I63.441	Cerebral infarction due to embolism of right cerebellar artery
I63.442	Cerebral infarction due to embolism of left cerebellar artery
I63.443	Cerebral infarction due to embolism of bilateral cerebellar arteries
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery
I63.49	Cerebral infarction due to embolism of other cerebral artery
I63.89	Other cerebral infarction
I67.841	Reversible cerebrovascular vasoconstriction syndrome
I67.848	Other cerebrovascular vasospasm and vasoconstriction
I97.0	Postcardiotomy syndrome
I97.110	Postprocedural cardiac insufficiency following cardiac surgery
I97.111	Postprocedural cardiac insufficiency following other surgery
I97.120	Postprocedural cardiac arrest following cardiac surgery
I97.121	Postprocedural cardiac arrest following other surgery
I97.130	Postprocedural heart failure following cardiac surgery
I97.131	Postprocedural heart failure following other surgery
I97.190	Other postprocedural cardiac functional disturbances following cardiac surgery
I97.191	Other postprocedural cardiac functional disturbances following other surgery
R00.0	Tachycardia, unspecified
R00.1	Bradycardia, unspecified
R00.2	Palpitations
R06.00	Dyspnea, unspecified
R06.01	Orthopnea
R06.02	Shortness of breath
R06.03	Acute respiratory distress
R06.09	Other forms of dyspnea
R06.2	Wheezing
R06.3	Periodic breathing
R06.4	Hyperventilation
R06.81	Apnea, not elsewhere classified
R06.82	Tachypnea, not elsewhere classified
R06.83	Snoring
R06.89	Other abnormalities of breathing
R07.2	Precordial pain
R07.82	Intercostal pain
R07.89	Other chest pain
R07.9	Chest pain, unspecified
R29.5	Transient paralysis

Diagnosis Code	Description
For CPT Codes 93241, 93242, 93243, 93244, 93245, 93246, 93247, and 93248	
R40.4	Transient alteration of awareness
R42	Dizziness and giddiness
R55	Syncope and collapse
T46.0X5A	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, initial encounter
T46.0X5D	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, subsequent encounter
T46.0X5S	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, sequela
T46.1X5A	Adverse effect of calcium-channel blockers, initial encounter
T46.1X5D	Adverse effect of calcium-channel blockers, subsequent encounter
T46.1X5S	Adverse effect of calcium-channel blockers, sequela
T46.2X5A	Adverse effect of other antidysrhythmic drugs, initial encounter
T46.2X5D	Adverse effect of other antidysrhythmic drugs, subsequent encounter
T46.2X5S	Adverse effect of other antidysrhythmic drugs, sequela
T46.905A	Adverse effect of unspecified agents primarily affecting the cardiovascular system, initial encounter
T46.905S	Adverse effect of unspecified agents primarily affecting the cardiovascular system, sequela
T46.995A	Adverse effect of other agents primarily affecting the cardiovascular system, initial encounter
T46.995S	Adverse effect of other agents primarily affecting the cardiovascular system, sequela
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy
Z86.73	Personal history of transient ischemic attack (TIA), and cerebral infarction without residual deficits
Z95.0	Presence of cardiac pacemaker
Z95.810	Presence of automatic (implantable) cardiac defibrillator
Z95.818	Presence of other cardiac implants and grafts
Z95.9	Presence of cardiac and vascular implant and graft, unspecified

Definitions

Holter Monitoring: (24-hour ECG monitoring) is a study used to evaluate the patient's ambient heart rhythm during a full day's (24 Hours) cycle. It is a wearable EKG monitor that records the overall rhythm and significant arrhythmias.

Outpatient Cardiac Telemetry: Involves the use of an automatically activated system that requires no patient intervention to either capture or transmit a dysrhythmia when it occurs. The purpose of this service is for real-time, continuous, long term (> 24 hours) cardiac surveillance of patients in order to identify and document a suspected and/or paroxysmal dysrhythmia.

References

CMS National Coverage Determinations (NCD)

[NCD 20.15 Electrocardiographic Services](#)

CMS Local Coverage Determinations (LCDs) and Articles

LCD	Article	Contractor	Medicare Part A	Medicare Part B
L33952 Cardiac Event Detection	A56452 Billing and Coding: Cardiac Event Detection	CGS	KY, OH	KY, OH

LCD	Article	Contractor	Medicare Part A	Medicare Part B
L33380 Long-Term Wearable Electrocardiographic Monitoring (WEM)	A57062 Billing and Coding: Long-Term Wearable Electrocardiographic Monitoring (WEM) A55836 Long-term wearable electrocardiographic monitoring (WEM) revision to the Part A and Part B LCD	First Coast	FL, PR, VI	FL, PR, VI
L34997 Real-Time, Outpatient Cardiac Telemetry	A52995 Real-Time, Outpatient Cardiac Telemetry	Novitas	AR, CO, DC, DE, LA, MD, MS, NJ, NM, OK, PA, TX	AR, CO, DC, DE, LA, MD, MS, NJ, NM, OK, PA, TX
L34953 Cardiac Event Detection Monitoring	A56600 Billing and Coding: Cardiac Event Detection Monitoring	Novitas	AR, CO, DC, DE, LA, MD, MS, NJ, NM, OK, PA, TX	AR, CO, DC, DE, LA, MD, MS, NJ, NM, OK, PA, TX
L34573 Cardiac Event Detection	A56606 Billing and Coding: Cardiac Event Detection	Palmetto	AL, GA, NC, SC, TN, VA, WV	
L34636 Electrocardiographic (EKG or ECG) Monitoring (Holter or Real-Time Monitoring)	A57476 Billing and Coding: Electrocardiographic (EKG or ECG) Monitoring (Holter or Real-Time Monitoring)	WPS	AK, AL, AR, AZ, CA, CO, CT, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MO, MS, MT, NC, ND, NE, NH, NJ, NM, NV, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY	IA, IN, KS, MI, MO, NE
L35490 Category III Codes	A56902 Billing and Coding: Category III Codes	WPS	AK, AL, AR, AZ, CA, CO, CT, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MO, MS, MT, NC, ND, NE, NH, NJ, NM, NV, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY	IA, IN, KS, MI, MO, NE
L33392 Category III CPT [®] Codes Retired 07/01/2020	A56195 Category III CPT [®] Codes- Related to Category III CPT [®] Codes (L33392) Retired 07/01/2020	NGS	CT, IL, MA, ME, MN, NH, NY, RI, VT, WI	CT, IL, MA, ME, MN, NH, NY, RI, VT, WI
L34370 Category III CPT [®] Codes Retired 06/19/2020	A57230 Billing and Coding: Category III CPT [®] Codes Retired 06/19/2020	CGS	KY, OH	KY, OH

CMS Benefit Policy Manual

[Chapter 15: § 80 Coverage of diagnostic x-ray, diagnostic laboratory and other diagnostic tests](#)

Guideline History/Revision Information

Revisions to this summary document do not in any way modify the requirement that services be provided and documented in accordance with the Medicare guidelines in effect on the date of service in question.

Date	Summary of Changes
04/01/2021	<p>Template Update</p> <ul style="list-style-type: none"> Reformatted policy; transferred content to new template
03/10/2021	<p>Policy Summary</p> <p><i>Non-Activated Continuous Recorders (Holter Monitor/External Electrocardiographic Recording)</i></p> <ul style="list-style-type: none"> Revised coverage guidelines for external electrocardiographic recording and event monitors; replaced language indicating: <ul style="list-style-type: none"> “The use of external electrocardiographic recording for <i>more than 48 hours up to 21 days</i> by continuous rhythm recording and storage may be considered medically necessary” with “the use of external electrocardiographic recording for <i>greater than 48 hours and up to 7 days or for greater than 7 days up to 15 days</i> by continuous rhythm recording and storage may be considered medically necessary” “The use of external electrocardiographic event monitors for <i>more than 48 hours up to 21 days</i> that are either patient-activated or auto-activated may be considered medically necessary” with “the use of external electrocardiographic event monitors for <i>greater than 48 hours and up to 7 days or for greater than 7 days up to 15 days</i> that are either patient-activated or auto-activated may be considered medically necessary” <p>Applicable Codes</p> <p><i>Diagnosis Codes</i></p> <p>For CPT codes 93241, 93242, 93243, 93244, 93245, 93246, 93247, and 93248</p> <ul style="list-style-type: none"> Added list of applicable ICD-10 codes: G45.0, G45.1, G45.2, G45.3, G45.4, G45.8, G45.9, I20.0, I20.1, I20.8, I20.9, I21.01, I21.02, I21.09, I21.11, I21.19, I21.21, I21.29, I21.3, I21.4, I21.9, I21.A1, I21.A9, I22.0, I22.1, I22.2, I22.8, I22.9, I24.0, I24.1, I24.8, I24.9, I25.10, I25.110, I25.111, I25.118, I25.119, I25.2, I25.3, I25.41, I25.5, I25.6, I25.700, I25.701, I25.708, I25.709, I25.710, I25.711, I25.718, I25.719, I25.720, I25.721, I25.728, I25.729, I25.730, I25.731, I25.738, I25.739, I25.750, I25.751, I25.758, I25.759, I25.760, I25.761, I25.768, I25.769, I25.790, I25.791, I25.798y, I25.799, I25.811, I25.812, I25.84, I25.89, I25.9, I31.0, I31.1, I34.0, I34.1, I34.2, I34.8, I34.9, I42.0, I42.1, I42.2, I42.3, I42.4, I42.5, I42.6, I42.7, I42.8, I42.9, I43, I44.0, I44.1, I44.2, I44.30, I44.39, I44.4, I44.5, I44.60, I44.69, I44.7, I45.0, I45.10, I45.19, I45.2, I45.3, I45.4, I45.5, I45.6, I45.81, I45.89, I45.9, I46.2, I46.8, I46.9, I47.0, I47.1, I47.2, I47.9, I48.0, I48.11, I48.19, I48.20, I48.21, I48.3, I48.4, I48.91, I48.92, I49.01, I49.02, I49.1, I49.2, I49.3, I49.40, I49.49, I49.5, I49.8, I49.9, I51.7, I51.9, I52, I63.10, I63.111, I63.112, I63.113, I63.119, I63.12, I63.131, I63.132, I63.133, I63.139, I63.19, I63.40, I63.411, I63.412, I63.413, I63.419, I63.421, I63.422, I63.423, I63.429, I63.431, I63.432, I63.433, I63.439, I63.441, I63.442, I63.443, I63.449, I63.49, I63.89, I67.841, I67.848, I97.0, I97.110, I97.111, I97.120, I97.121, I97.130, I97.131, I97.190, I97.191, R00.0, R00.1, R00.2, R06.00, R06.01, R06.02, R06.03, R06.09, R06.2, R06.3, R06.4, R06.81, R06.82, R06.83, R06.89, R07.2, R07.82, R07.89, R07.9, R29.5, R40.4, R42, R55, T46.0X5A, T46.0X5D, T46.0X5S, T46.1X5A, T46.1X5D, T46.1X5S, T46.2X5A, T46.2X5D, T46.2X5S, T46.905A, T46.905S, T46.995A, T46.995S, Z09, Z79.891, Z79.899, Z86.73, Z95.0, Z95.810, Z95.818, and Z95.9 <p>For CPT codes 0295T, 0296T, 0297T, and 0298T</p> <ul style="list-style-type: none"> Removed list of applicable ICD-10 codes: G45.0, G45.1, G45.2, G45.3, G45.4, G45.8, G45.9, I20.0, I20.1, I20.8, I20.9, I21.01, I21.02, I21.09, I21.11, I21.19, I21.21, I21.29, I21.3, I21.4, I21.9, I21.A1, I21.A9, I22.0, I22.1, I22.2, I22.8, I22.9, I24.0, I24.1, I24.8, I24.9, I25.10, I25.110, I25.111, I25.118, I25.119, I25.2, I25.3, I25.41, I25.5, I25.6, I25.700, I25.701, I25.708, I25.709, I25.710, I25.711, I25.718,

Date	Summary of Changes
	<p>I25.719, I25.720, I25.721, I25.728, I25.729, I25.730, I25.731, I25.738, I25.739, I25.750, I25.751, I25.758, I25.759, I25.760, I25.761, I25.768, I25.769, I25.790, I25.791, I25.798, I25.799, I25.811, I25.812, I25.84, I25.89, I25.9, I31.0, I31.1, I34.0, I34.1, I34.2, I34.8, I34.9, I42.0, I42.1, I42.2, I42.3, I42.4, I42.5, I42.6, I42.7, I42.8, I42.9, I43, I44.0, I44.1, I44.2, I44.30, I44.39, I44.4, I44.5, I44.60, I44.69, I44.7, I45.0, I45.10, I45.19, I45.2, I45.3, I45.4, I45.5, I45.6, I45.81, I45.89, I45.9, I46.2, I46.8, I46.9, I47.0, I47.1, I47.2, I47.9, I48.0, I48.1, I48.11, I48.19, I48.2, I48.20, I48.21, I48.3, I48.4, I48.91, I48.92, I49.01, I49.02, I49.1, I49.2, I49.3, I49.40, I49.49, I49.5, I49.8, I49.9, I51.7, I51.9, I52, I63.10, I63.111, I63.112, I63.113, I63.119, I63.12, I63.131, I63.132, I63.133, I63.139, I63.19, I63.40, I63.411, I63.412, I63.413, I63.419, I63.421, I63.422, I63.423, I63.429, I63.431, I63.432, I63.433, I63.439, I63.441, I63.442, I63.443, I63.449, I63.49, I97.0, I97.110, I97.111, I97.120, I97.121, I97.130, I97.131, I97.190, I97.191, R00.0, R00.1, R00.2, R06.01, R06.02, R06.03, R06.09, R06.2, R06.3, R06.4, R06.81, R06.82, R06.83, R06.89, R07.2, R07.82, R07.89, R07.9, R29.5, R40.4, R42, R55, T46.0X5A, T46.0X5D, T46.0X5S, T46.1X5A, T46.1X5D, T46.1X5S, T46.2X5A, T46.2X5D, T46.2X5S, Z09, Z79.891, Z79.899, Z86.73, Z95.0, Z95.810, Z95.818, and Z95.9</p> <p>Supporting Information</p> <ul style="list-style-type: none"> Archived previous policy version MPG109.09

Purpose

The Medicare Advantage Policy Guideline documents are generally used to support UnitedHealthcare Medicare Advantage claims processing activities and facilitate providers' submission of accurate claims for the specified services. The document can be used as a guide to help determine applicable:

- Medicare coding or billing requirements, and/or
- Medical necessity coverage guidelines; including documentation requirements.

UnitedHealthcare follows Medicare guidelines such as NCDs, LCDs, LCAs, and other Medicare manuals for the purposes of determining coverage. It is expected providers retain or have access to appropriate documentation when requested to support coverage. Please utilize the links in the [References](#) section below to view the Medicare source materials used to develop this resource document. This document is not a replacement for the Medicare source materials that outline Medicare coverage requirements. Where there is a conflict between this document and Medicare source materials, the Medicare source materials will apply.

Terms and Conditions

The Medicare Advantage Policy Guidelines are applicable to UnitedHealthcare Medicare Advantage Plans offered by UnitedHealthcare and its affiliates.

These Policy Guidelines are provided for informational purposes, and do not constitute medical advice. Treating physicians and healthcare providers are solely responsible for determining what care to provide to their patients. Members should always consult their physician before making any decisions about medical care.

Benefit coverage for health services is determined by the member specific benefit plan document* and applicable laws that may require coverage for a specific service. The member specific benefit plan document identifies which services are covered, which are excluded, and which are subject to limitations. In the event of a conflict, the member specific benefit plan document supersedes the Medicare Advantage Policy Guidelines.

Medicare Advantage Policy Guidelines are developed as needed, are regularly reviewed and updated, and are subject to change. They represent a portion of the resources used to support UnitedHealthcare coverage decision making. UnitedHealthcare may modify these Policy Guidelines at any time by publishing a new version of the policy on this website. Medicare source materials used to develop these guidelines include, but are not limited to, CMS National Coverage Determinations (NCDs), Local Coverage Determinations (LCDs), Medicare Benefit Policy Manual, Medicare Claims Processing Manual, Medicare Program Integrity Manual, Medicare Managed Care Manual, etc. The information presented in the Medicare Advantage Policy Guidelines is believed to be accurate and current as of the date of publication and is provided on an "AS IS"

basis. Where there is a conflict between this document and Medicare source materials, the Medicare source materials will apply.

You are responsible for submission of accurate claims. Medicare Advantage Policy Guidelines are intended to ensure that coverage decisions are made accurately based on the code or codes that correctly describe the health care services provided. UnitedHealthcare Medicare Advantage Policy Guidelines use Current Procedural Terminology (CPT®), Centers for Medicare and Medicaid Services (CMS), or other coding guidelines. References to CPT® or other sources are for definitional purposes only and do not imply any right to reimbursement or guarantee claims payment.

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*For more information on a specific member's benefit coverage, please call the customer service number on the back of the member ID card or refer to the [Administrative Guide](#).