

# 2017 CARDIAC DEVICE MONITORING SERVICES

Physician — Cardiac Rhythm and Heart Failure

Patient Name \_\_\_\_\_

Physician \_\_\_\_\_

Date \_\_\_\_\_

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## PACEMAKERS

### Device Follow-Up: Pacemakers In Person

<input type="checkbox"/>	93279*	Programming device evaluation; single lead pacemaker system
<input type="checkbox"/>	93280*	Programming device evaluation; dual lead pacemaker system
<input type="checkbox"/>	93281*	Programming device evaluation; multiple lead pacemaker system
<input type="checkbox"/>	93288*	Interrogation device evaluation; single, dual, or multiple lead pacemaker system
<input type="checkbox"/>	0389T*	Programming device evaluation; leadless pacemaker system
<input type="checkbox"/>	0391T*	Interrogation device evaluation; leadless pacemaker system

### Remote Pacemaker (Up to 90 days; Do not report if the monitoring period is less than 30 days)

<input type="checkbox"/>	93294	Interrogation device evaluation(s); single, dual, or multiple lead pacemaker system – PC
<input type="checkbox"/>	93296	Interrogation device evaluation(s); single, dual, or multiple lead pacemaker system – TC

### Other Pacemaker Device Evaluations or Electronic Analysis

<input type="checkbox"/>	93286*	Peri-procedural device evaluation (in person) and programming device system parameters before or after a surgery, procedure, or test; pacemaker system
<input type="checkbox"/>	93293*	TTM rhythm strip pacemaker evaluation(s), up to 90 days (Do not report if the monitoring period is less than 30 days)
<input type="checkbox"/>	93724*	Electronic analysis of antitachycardia pacemaker system
<input type="checkbox"/>	0390T*	Peri-procedural device evaluation (in person) and programming device system parameters before or after a surgery, procedure, or test; leadless pacemaker system

## IMPLANTABLE DEFIBRILLATORS

### Device Follow-Up: ICDs In Person

<input type="checkbox"/>	93260*	Programming device evaluation; implantable subcutaneous lead defibrillator system
<input type="checkbox"/>	93261*	Interrogation device evaluation; implantable subcutaneous lead defibrillator system
<input type="checkbox"/>	93282*	Programming device evaluation; single lead transvenous implantable defibrillator system
<input type="checkbox"/>	93283*	Programming device evaluation; dual lead transvenous implantable defibrillator system
<input type="checkbox"/>	93284*	Programming device evaluation; multiple lead transvenous implantable defibrillator system
<input type="checkbox"/>	93289*	Interrogation device evaluation; single, dual, or multiple lead transvenous implantable defibrillator system

\* Service performed in a facility setting (i.e., hospital) may require a –26 modifier that represents professional component only.

## IMPLANTABLE DEFIBRILLATORS *continued*

### Remote ICD (Up to 90 days; Do not report if the monitoring period is less than 30 days)

<input type="checkbox"/>	93295	Interrogation device evaluation(s); single, dual, or multiple lead implantable defibrillator system – PC
<input type="checkbox"/>	93296	Interrogation device evaluation(s); single, dual, or multiple lead implantable defibrillator system – TC

### Other ICD Device Evaluations

<input type="checkbox"/>	93287*	Peri-procedural device evaluation (in person) and programming device system parameters before or after a surgery, procedure, or test; implantable defibrillator system
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## IMPLANTABLE LOOP RECORDER (ILR)

### Device Follow-Up: ILR In Person

<input type="checkbox"/>	93285*	Programming device evaluation; ILR
<input type="checkbox"/>	93291*	Interrogation device evaluation; ILR

### Remote ILR (Up to 30 days; Do not report if the monitoring period is less than 10 days)

<input type="checkbox"/>	93298	Interrogation device evaluation(s); ILR – PC
<input type="checkbox"/>	93299	Interrogation device evaluation(s); ICM or ILR – TC

## IMPLANTABLE CARDIOVASCULAR MONITOR (ICM)

### Device Follow-Up: ICM In Person

<input type="checkbox"/>	93290*	Interrogation device evaluation; ICM
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### Remote ICM (Up to 30 days; Do not report if the monitoring period is less than 10 days)

<input type="checkbox"/>	93297	Interrogation device evaluation(s); ICM – PC
<input type="checkbox"/>	93299	Interrogation device evaluation(s); ICM or ILR – TC

## WEARABLE CARIOVERTER-DEFIBRILLATOR

### Device Follow-Up and Initial Set-Up: Wearable Cardioverter-Defibrillator In Person

<input type="checkbox"/>	93292*	Interrogation device evaluation; wearable defibrillator system
<input type="checkbox"/>	93745*	Initial set-up and programming; wearable cardioverter-defibrillator

### Commonly Used Modifier:

–26: Professional component (certain procedures are a combination of a physician or other qualified health care professional component and a technical component. When the physician or other qualified health care professional component is reported separately, the service may be identified by adding modifier –26)\*

### NOTES

TC: Technical Component; PC: Professional Component

\* Service performed in a facility setting (i.e., hospital) may require a –26 modifier that represents professional component only.

### Additional Coding Information:

It is important to refer to the CPT® code<sup>1</sup> descriptions to ensure that a billed code meets the specific requirements defined for each individual code. The local Medicare contractor/payer should be contacted for interpretation of applicable policies. In addition, the National Correct Coding Initiative (NCCI) edits should be checked.

Cardiac device evaluation CPT codes include both in person and remote monitoring services. Remote monitoring codes represent either a 30- or 90-day monitoring period and there are separate codes for the professional component (PC) and the technical component (TC).

**Physician Billing:** Remote monitoring services require billing two different CPT codes for an office Place of Service (POS),<sup>2</sup> when both components of the service are performed by the office. One code represents the professional component (PC) and another code represents the technical component (TC). These code pairs are: CPT 93294 and 93296, 93295 and 93296, 93297 and 93299, and 93298 and 93299. The in person codes are configured as a global code. When the in person device evaluation or interrogation is performed in a facility (hospital) setting, modifier -26 should be appended to the applicable in person code when billing the professional component (PC). This -26 modifier is not applicable for remote monitoring services since there is a separate PC code, CPT 93294, 93295, 93297, and 93298.

The professional component reflects physician time and intensity in furnishing the service, including activities before and after direct patient contact.<sup>3</sup>

The technical component<sup>3</sup> refers to the resources used in furnishing the service, such as office rent, wages of personnel, and other office practice expenses. For remote monitoring, the CPT code description (CPT codes 93296 & 93299) identifies the work involved with remote monitoring technical services, including remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results.

**Hospital Inpatient or Outpatient Billing:** The service is "split-billed" with the professional component (PC) billed on a 1500 (professional claim form), and the technical component (TC, facility fee) is billed by the hospital on a UB-04 claim form.

### Physician Supervision Requirements

Cardiac device monitoring services are defined by Medicare as diagnostic services.<sup>4</sup> As such, Medicare regulations require specific supervision for diagnostic tests. These are 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 (PFS) lookup function on the Medicare website<sup>5</sup> or under "PFS Relative Value Files" for 2017.<sup>5</sup>

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 evaluations when performed with an office POS

**General supervision<sup>6</sup>** 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<sup>7</sup>** in a hospital (facility) setting means that the physician must be immediately available to furnish assistance and direction throughout the performance of the procedure. The physician is not required to be present in the room where the procedure is being performed in this hospital (facility) setting or within any other physical boundary as long as he or she is immediately available.

Medicare diagnostic testing rules state that the supervisor must be a Physician. A Non-Physician Practitioner (NPP) such as a nurse practitioner or a physician assistant cannot supervise staff.<sup>4</sup>

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.

**Cardiac Rhythm and Heart Failure (CRHF)** coding, coverage and reimbursement information is available at [www.medtronic.com/crdmreimbursement](http://www.medtronic.com/crdmreimbursement)

### References

- <sup>1</sup> CPT copyright 2016 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.
- <sup>2</sup> Medicare Place of Service (POS) information is located in Chapter 26 of the Medicare Claims Processing Manual at: <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c26.pdf>. New and Revised Place of Service Codes (POS) for Outpatient Hospital effective January 1, 2016: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3315CP.pdf>
- <sup>3</sup> Medicare Learning Network® Definition of Technical Component for Diagnostic Services [https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/Radiology\\_FactSheet\\_ICN907164.pdf](https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/Radiology_FactSheet_ICN907164.pdf)
- <sup>4</sup> Publication #100-04 Medicare Claims Processing Manual Chapter 13 is located at: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c13.pdf>
- <sup>5</sup> The Medicare supervision requirements are available by accessing the "PFS Relative Value Files" or "Medicare Physician Schedule Look-Up" located at: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/index.html>
- <sup>6</sup> Publication #100-02 Medicare Benefit Policy Manual Chapter 15 is available at: <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c15.pdf>
- <sup>7</sup> Publication #100-02 Medicare Benefit Policy Manual Chapter 6 is available at: <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c06.pdf>.

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