

Medical Policy: Ambulatory ECG with MCOT or Continuous Computerized Daily Monitoring with or without Auto-Detection (Medicare)



POLICY NUMBER	DATE OF LAST REVIEW	APPROVED BY
M20200051	08/18/2020	MPC (Medical Policy Committee)

IMPORTANT NOTE ABOUT THIS MEDICAL POLICY:

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Definitions

Ambulatory Electrocardiogram (ECG) with Mobile Cardiac Outpatient Telemetry (MCOT)	Real-time continuous attended cardiac monitoring systems, such as Mobile Cardiac Outpatient Telemetry™ (MCOT™), are defined as a real-time, outpatient cardiac monitoring system that is automatically activated and requires no patient intervention to either capture or transmit an arrhythmia when it occurs. Upon arrhythmia detection, the device utilizes the standard telephone line or wireless communications and transmits the electrocardiogram (EKG) waveform to the receiving center. The patient’s physician is made aware of arrhythmias based on predetermined notification criteria, tailored to the patient by the physician. Real-time cardiac monitoring overcomes limitations of Holter monitors and patient-activated event recorders by providing continuous outpatient EKG monitoring for periods ranging up to several weeks.
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Guideline

MUST MEET **ALL** OF THE FOLLOWING:

1. Monitoring will be used for one of the following:
 - a. Evaluation of symptoms of an arrhythmia;
 - b. Evaluation of the response to antiarrhythmic drug therapy;
 - c. Evaluation of myocardial infarction survivors;
 - d. Assessment of individuals with coronary artery disease with active symptoms, to correlate chest pain with ST- segment changes;
 - e. Evaluation of acute and subacute forms of ischemic heart disease;
 - f. To detect arrhythmias in individuals who have ablative procedures;
 - g. Transient ischemic episodes.

2. A 24-hour Holter monitor or a standard cardiac event monitor (i.e., external loop recorder) have failed to detect an arrhythmia or were non-diagnostic.

Examples of symptoms are:

1. Arrhythmias
2. Chest pain
3. Syncope
4. Vertigo
5. Palpitations
6. Transient ischemic episodes
7. Dyspnea

Limitation/Exclusion

Mobile Cardiac Outpatient Telemetry or Continuous Computerized Daily Monitoring with Auto-Detection is contraindicated in the following:

1. Individuals with a history of sustained ventricular tachycardia or documented occurrence of ventricular fibrillation
2. Individuals at risk for ventricular tachycardia or ventricular fibrillation individuals who should be hospitalized

Coding Criteria

Applicable CPT Codes	
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

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surveillance, analysis and transmission of daily and emergent data reports as prescribed by a physician or other qualified health care professional

References

National Coverage Determination (NCD) for Electrocardiographic Services (20.15)

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Local Coverage Article: Billing and Coding: Electrocardiographic (EKG or ECG) Monitoring (Holter or Real-Time Monitoring) (A57476). Accessed 08/21/2020

<https://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=57476&ver=5&SearchType=Advanced&CoverageSelection=Local&ArticleType=BC%7cSAD%7cRTC%7cReg&PolicyType=Both&s=9&CptHcpcsCode=93228&kq=true&bc=EAAAABAAAAA&>

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Sivakumaran S, Krahn A, Finan J, Yee R, Renner S, Skanes A. A prospective randomized comparison of loop recorders versus Holter monitors in patients with syncope or presyncope. Am J Med. 2003; 115(1):1-5.

Vasamreddy CR, Dalal D, Dong J, et al. Symptomatic and asymptomatic atrial fibrillation in patients undergoing radiofrequency catheter ablation. J Cardiovasc Electrophysiol. 2006;17(2):134-139.

Revision history

DATE	REVISION
08/21/2020	Reformatted and reorganized policy, transferred content to new template with new Medical Policy Number Updated References-Added NCD (20.15) LCD article (A57476) LCD (L34636) Added Definitions
Review History- 10/29/08, 11/10/10, 11/09/11, 12/05/12, 12/03/14, 12/09/15	