# Medical Pre-Authorization Criteria

## Procedure/Equipment

<table>
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<th>CPT/HCPCS Codes</th>
<th>Ambulatory ECG with MCOT or Continuous Computerized Daily Monitoring with or without Auto-Detection</th>
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<td>93228, 93229, 0295T, 0296T, 0297T, 0298T</td>
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## MUST MEET ALL OF THE FOLLOWING:

1. Monitoring will be used for one of the following:
   a. Evaluation of symptoms of arrhythmias;\(^1\)
   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.

\(^1\)Examples of symptoms are:
- Arrhythmias
- Chest pain
- Syncope
- Vertigo
- Palpitations
- Transient ischemic episodes
- Dyspnea

Mobile Cardiac Outpatient Telemetry or Continuous Computerized Daily Monitoring with Auto-Detection is **contraindicated** in the following:
- individuals with a history of sustained ventricular tachycardia or documented occurrence of ventricular fibrillation
- individuals at risk for ventricular tachycardia or ventricular fibrillation individuals who should be hospitalized.

## Not Covered

## References

1. CMS Local Coverage Determination for Electrocardiographic (EKG or EEG) Monitoring (Holter or Real Time Monitoring) (L29584) effective date 10/16/2009. Accessed at: [http://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=29584&ContrId=268&ver=30&ContrVer=1&SearchType=Advanced&Cove rageSelection=Both&NCSSelection=NCA%7cCAL%7cNCD%7cMEDCAC%7cTA%7cMCD&Art icleType=SAD%7cEd&PolicyType=Final&s=9&KeyWord=real+time+monitoring&KeyWordLo okUp=Title&KeyWordSearchType=Exact&kq=true&bc=IAAAAAAABAAAAA%3d%3d&.](http://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=29584&ContrId=268&ver=30&ContrVer=1&SearchType=Advanced&Cover ageSelection=Both&NCSSelection=NCA%7cCAL%7cNCD%7cMEDCAC%7cTA%7cMCD&ArticleType=SAD%7cEd&PolicyType=Final&s=9&KeyWord=real+time+monitoring&KeyWordLookUp=Title&KeyWordSearchType=Exact&kq=true&bc=IAAAAAAABAAAAA%3d%3d&)

MEDICAL PRE-AUTHORIZATION CRITERIA
(MEDICARE)


REFERENCES (continued)

REVIEW HISTORY
10/29/08, 11/10/10, 11/09/11, 12/05/12, 12/03/14