



# Cardiology Services Payment Policy

## **Policy**

Fallon Community Health Plan (FCHP) reimburses contracted providers for covered cardiology professional services.

## **Definitions**

**Cardiology** is the medical specialty that focuses on the diagnosis and treatment of disorders and diseases of the heart and circulatory system, including the following services:

- Electrocardiogram (ECG, EKG)
- Echocardiography
- Nuclear stress testing

**Cardiac rehabilitation** is a program of multidisciplinary treatment for patients with heart disease. This may include counseling, diagnostic tests, education, EKG, and ECG monitoring.

## **Benefits application**

### **Commercial**

- FCHP Direct Care/FCHP Select Care
- Commonwealth Care
- Companion Care
- FCHP MassHealth
- Major Medical
- Fallon Preferred Care

### **Senior Plan**

- Fallon Senior Plan™
- Fallon Senior Plan Preferred

## **Reimbursement**

FCHP reimburses the following professional services and/or components:

- Multiple ECG/EKGs per day
- ECG/EKG interpretation w/Holter or cardiac event monitor
- Transcatheter repair of congenital heart defects
- Cardiac event monitors
- Holter monitors
- Trans-telephonic transmission of post-symptom electrocardiograms
- Cardiac stress testing
- Angioplasty
- Coronary artherectomy
- Pacemaker or pacing cardioverter defibrillator insertion
- Cardiac catheterization services
- Cardiac rehabilitation

FCHP does **NOT** reimburse the following services

- External counterpulsation (ECP) services
- Mobile cardiac outpatient telemetry
- Observation services when billed with surgical day care services
- An E&M office visit billed with a stress test (93015 – 93018) or non-invasive physiologic study and procedure (93875, 93922, 93923, 93924, 93965), unless indicated as a significant and separately identifiable E&M service by the same physician on the same date of service.

## **Referral/notification/preauthorization requirements**

PCP referrals are required for all specialty visits. For a description of services requiring a PCP referral, please refer to the PCP referral and preauthorization grid located in the Managing Patient Care section of the *Provider Manual* under PCP Referral and Plan Preauthorization Process.

The ordering physician is required to obtain preauthorization for:

- Unlisted CPT codes
- The applicable codes found on the List of Procedures Requiring Preauthorization located in the Managing Patient Care section of the *Provider Manual* under PCP Referral and Plan Preauthorization Process.

## **Billing/coding guidelines**

### **Cardiac catheterization**

- If billing only the professional component of catheterization services, use a -26 modifier.

### **Multiple EKGs**

- When billing multiple ECG/EKGs on the same day, affix a modifier -76 or -77 as appropriate.
- When billing ECG/EKG recordings/rhythm strips over a 30-day period, use the last date of tracing; claims submitted with a date range will deny for itemization.

### **Cardiac stress tests**

- Use appropriate HCPCS level II codes to bill drugs/contrast agents used in conjunction with stress testing.

#### **Documentation**

The patient's medical record must indicate that the entire procedure was either performed by the physician or under the physician's direct personal supervision. **Note:** Direct personal supervision means that the physician must be physically present in the same office suite and immediately available to provide assistance and direction throughout the test. Documentation supporting the medical necessity should be legible, maintained in the patient's medical record, and available to FCHP upon request. When repeating stress tests, the medical record documentation must identify separate clinical indications, regardless of the ICD-9-CM code submitted for the test.

### **Cardiac rehabilitation**

- FCHP reimburses cardiac rehabilitation services performed in a contracted facility when ordered by the member's PCP or a participating specialist **within 26 weeks** after diagnosis.

## **Place of service**

This policy applies to services rendered in all settings.

## **Policy history**

Origination date: 03/01/09

Connection date & details: 03/01/09 New policy

*This payment policy has been developed to provide information regarding general billing, coding and documentation guidelines for FCHP. Even though this payment policy may indicate that a particular service or supply is considered covered, specific provider contract terms and/or member individual benefit plans may apply and this policy is not a guarantee of payment. FCHP reserves the right to apply this payment policy to all FCHP companies and subsidiaries.*