



Heart Rhythm Society<sup>SM</sup>

Restoring the Rhythm of Life

## Definitions: Cardiac Device Monitoring Codes

### **Pacemaker or ICD Programming Evaluation (93279-93284)**

*Definition:* All device functions, including the battery, programmable settings and lead(s) when present are Interrogated & evaluated. Iterative adjustments provide information that permits the operator to assess and select the most appropriate final program parameters to provide for consistent delivery of the appropriate therapy and to verify the efficiency and function of the device.

### **Interrogation Device Evaluation In-Person (93288-93291)**

*Definition:* Using an office, hospital or emergency room instrument, stored and measured information about the lead(s) when present, sensor(s) when present, battery and the implanted pulse generator function, as well as data collected about the patient's heart rhythm and heart rate is retrieved. The retrieved information is evaluated to determine the current programming of the device and to evaluate certain aspects of the device function, such as battery voltage, lead impedance, tachycardia detection settings, and rhythm treatment settings.

### **Interrogation Device Evaluation Remote (93294-93299)**

*Definition:* Interrogation device evaluation (remote) is a procedure performed for patients with pacemakers, implantable cardioverter defibrillators or implantable loop recorders using data obtained remotely. All device functions, including the programmed parameters, lead(s), battery, capture and sensing function, presence or absence of therapy for ventricular tachyarrhythmias (for ICDs) and underlying heart rhythm are evaluated.

### **Peri-Procedural Programming (93286-93287)**

*Definition:* The device system data are interrogated to evaluate the lead(s), sensor(s) and battery along with review of stored information including patient and system measurements. The device is programmed to settings appropriate for the surgery, procedure or test. A second evaluation and programming are performed after the surgery, procedure or test to provide settings appropriate to the post procedural situation.

### **Transtelephonic Rhythm Strip Pacemaker Evaluation (93293)**

*Definition:* Also called transtelephonic pacemaker monitoring. The service is an electrocardiographic rhythm strip transmitted over the telephone by the patient using a transmitter and recorded by a receiving location using a receiver/recorder. The electrocardiographic rhythm strip is recorded both with and without a magnet applied over the pacemaker. The rhythm strip is evaluated for heart rate and rhythm, atrial and ventricular capture (if observed) and atrial and ventricular sensing (if observed). Also the battery status is determined by measurement of the paced rate during the magnet applied electrocardiographic rhythm strip.

### **Implantable Cardiovascular Monitor (93290)**

*Definition:* Used to assist the physician in the management of non-rhythm related cardiac conditions such as heart failure. The device collects longitudinal physiologic cardiovascular data elements from one or more internal sensors (such as right ventricular pressure, left

atrial pressure, respiratory rate or an index of lung water) and/or external sensors for patient assessment and management. The function of the ICM may be an additional function of an implantable cardiac device (CRT-D) or a function of a stand-alone device

#### **Implantable Loop Recorder (93285)**

*Definition:* An implantable device that continuously records the electrocardiographic rhythm triggered automatically by rapid and slow heart rates or by the patient during a symptomatic episode. The ILR function may be the only function of the device or it may be part of a pacemaker or ICD.

#### **Wearable Mobile Cardiovascular Telemetry (93228)**

*Definition:* Mobile cardiovascular telemetry continuously records the electrocardiographic rhythm from external electrodes placed on the patient's body. Segments of the ECG data are automatically (without patient intervention) transmitted to a remote surveillance location by cellular or landline telephone signal. The segments of the rhythm, selected for transmission, are triggered automatically (MCT device algorithm) by rapid and slow heart rates or by the patient during a symptomatic episode. There is continuous real time data analysis by preprogrammed algorithms in the device and attended surveillance of the transmitted rhythm segments by a surveillance center technician to evaluate any arrhythmias and to determine signal quality. The surveillance center technician reviews the data and notifies the physician depending on the prescribed criteria.