

Medical Policy Mobile Cardiac Outpatient Telemetry

Policy Number: 035

Commercial and Connector/Qualified Health Plans	MassHealth	Medicare Advantage
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Overview

The purpose of this document is to describe the guidelines Mass General Brigham Health Plan utilizes to determine medical appropriateness for Mobile Cardiac Outpatient Telemetry (MCOT). The treating provider must request prior authorization for MCOT.

Coverage Guidelines

Medical necessity for Mobile Cardiac Outpatient Telemetry is determined through InterQual[®] criteria. Mass General Brigham Health Plan uses the Electrocardiography, Ambulatory (AECG) criteria. To access the InterQual[®] Criteria Lookup Tool, log in to Mass General Brigham Health Plan's Provider website at MassGeneralBrighamHealthPlan.org. Mass General Brigham Health Plan covers Mobile Cardiac Outpatient Telemetry when recommended by the member's primary care provider or referring specialist and when the request meets medical necessity criteria.

Medicare Variation

Mass General Brigham Health Plan uses guidance from the Centers for Medicare and Medicaid Services (CMS) for coverage determinations for its Medicare Advantage plan members. National Coverage Determinations (NCDs), Local Coverage Determinations (LCDs), Local Coverage Articles (LCAs) and documentation included in the Medicare manuals are the basis for coverage determinations. When there is no guidance from CMS for the requested service, Mass General Brigham Health Plan's medical policies are used for coverage determinations. At the time of Mass General Brigham Health Plan's most recent policy review, Medicare has an NCD for Electrocardiographic Services (20.15).

Codes

The following codes are included below for informational purposes only; inclusion of a code does not constitute or imply coverage.

Codes	Code Description
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

This list of codes applies to commercial and MassHealth plans only.



to a remote attended surveillance center for up to 30 days; technical support for
connection and patient instructions for use, attended surveillance, analysis and
transmission of daily and emergent data reports as prescribed by a physician or other
qualified health care professional

Effective

April 2023: Annual Review. Medicare Advantage added to table. Medicare Variation language added.

April 2022: Annual Review. References Updated.

October 2021: InterQual[®] criteria adopted. Revised coverage guidelines section. Removed the Exclusions and Definitions sections.

April 2021: Annual review. References updated.

March 2020: Annual review. References updated.

March 2019: Annual review. Updated references.

March 2018: Annual review. Added clarifying sentence to coverage guidelines. Removed age restriction of 18 years old under criteria section.

April 2017: Annual review.

April 2016: Annual review.

April 2015: Annual review, no significant changes.

April 2014: Annual review, no significant changes.

April 2013: Annual review, no significant changes.

January 2012: Effective Date.

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