

Carnation Ambulatory Monitor (CAM™)

Reimbursement Coding Guide



The CAM is a single use, continuous recording ambulatory ECG monitor that records for up to 14 days.

Indications for Use: The monitor is designed to provide extended duration cardiac monitoring for people who are suspected of having cardiac arrhythmias.

Patient Population: The intended population includes both males and females not weighing less than 10 kg (22 lbs) who may have cardiac arrhythmias.

ICD-10-CM DIAGNOSIS CODES¹

ICD-10-CM diagnosis codes classify and describe code diagnoses and symptoms of the patient. Report all appropriate ICD-10-CM diagnosis codes to support medical necessity of the CAM patch. The following list of common ICD-10-CM codes/ranges are provided to aid in your decision process. This is not a comprehensive list of all available codes, and it is possible that there are more appropriate codes for any given diagnosis or symptom. The codes presented here are consistent with coverage policies published by CMS and large commercial insurance companies.

Atrioventricular and left bundle-branch block	
I44.0	Atrioventricular block, first degree
I44.1	Atrioventricular block, second degree
I44.2	Atrioventricular block, complete
I44.39	Other atrioventricular block
I44.4	Left anterior fascicular block
I44.5	Left posterior fascicular block
I44.60	Unspecified fascicular block
I44.69	Other fascicular block
I44.7	Left bundle-branch block, unspecified
Other conduction disorders	
I45.0	Right fascicular block
I45.19	Other right bundle-branch block
I45.2	Bifascicular block
I45.3	Trifascicular block
I45.4	Nonspecific intraventricular block
I45.5	Other specified heart block
I45.6	Pre-excitation syndrome
I45.81	Long QT syndrome
I45.89	Other specified conduction disorders
I45.9	Conduction disorder, unspecified
Paroxysmal tachycardia	
I47.0	Re-entry ventricular arrhythmia
I47.1	Supraventricular tachycardia
I47.2	Ventricular tachycardia
I47.9	Paroxysmal tachycardia, unspecified

Atrial fibrillation and flutter	
I48.0	Paroxysmal atrial fibrillation
I48.11	Longstanding persistent atrial fibrillation
I48.19	Other persistent atrial fibrillation
I48.20	Chronic atrial fibrillation, unspecified
I48.21	Permanent atrial fibrillation
I48.3	Typical atrial flutter
I48.4	Atypical atrial flutter
I48.91	Unspecified atrial fibrillation
I48.92	Unspecified atrial flutter
Other cardiac arrhythmias	
I49.01	Ventricular fibrillation
I49.02	Ventricular flutter
I49.1	Atrial premature depolarization
I49.2	Junctional premature depolarization
I49.3	Ventricular premature depolarization
I49.40	Unspecified premature depolarization
I49.49	Other premature depolarization
I49.5	Sick sinus syndrome
I49.8	Other specified cardiac arrhythmias
I49.9	Cardiac arrhythmia, unspecified
Abnormalities of heartbeat	
R00.2	Palpitations
Symptoms, signs and abnormal findings	
R42	Dizziness and giddiness
R55	Syncope and collapse

CPT® PROCEDURE CODES²

CPT procedure codes describe the medical, surgical, and diagnostic services provided to the patient. The following information includes the commonly billed physician codes for cardiac monitoring services. This is not a comprehensive list of all available codes, and it is possible that there are more appropriate codes for any given service/procedure.

Continuous Cardiac Monitoring (Holter Monitoring) up to 48 hours

CPT Code	APC Category	Description	RVUs
93224	N/A	Electrocardiographic monitoring for up to 48 hours by continuous original ECG waveform recording and storage, with visual superimposition scanning; includes recording, scanning analysis with report, physician review and interpretation	2.40
93225	5734	Recording (includes hook-up, recording and disconnection)	0.61
93226	5734	Scanning analysis with report	1.24
93227	N/A	Physician review and interpretation	0.55

(Do not report 93224 in conjunction with 93225-93227)

Continuous Cardiac Monitoring up to 7 days*

CPT Code	APC Category	Description	RVUs
93241	N/A	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation	
93242	5732	Recording (includes connection and initial recordings)	0.45
93243	5733	Scanning analysis with report	
93244	N/A	Physician review and interpretation	0.72

(Do not report 93241 in conjunction with 93242-93244)

Continuous Cardiac Monitoring up to 15 days*

CPT Code	APC Category	Description	RVUs
93245	N/A	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation	
93246	5733	Recording (includes connection and initial recordings)	0.45
93247	5734	Scanning analysis with report	
93248	N/A	Physician review and interpretation	0.79

(Do not report 93245 in conjunction with 93246-93248)

* CPT codes 0295T-0298T are discontinued effective January 1, 2021 and replaced by these new Category I codes

DOCUMENTATION REQUIREMENTS

Documentation supporting medical necessity is vital for ensuring proper reimbursement for use of the CAM patch. Include the following recommended documentation components to support the claim:

- Patient's relevant signs and symptoms and pertinent medical history
- Frequency of symptom occurrence
- Prior test results (particularly previous cardiac monitoring tests)
- Rationale for the need for extended cardiac monitoring (>48 hrs), if applicable
- Expectations on improved diagnostic implications and patient compliance using the CAM patch

Disclaimer: The information contained in this document is provided for convenience only and represents no statement, promise or guarantee by Bardy Diagnostics concerning coverage or levels of reimbursement. Payment will vary by geographic locality. It is always the provider's responsibility to determine accurate coding, coverage and claim information for the services that were provided.

¹ The International Statistical Classification of Diseases and Related Health Problems, 10th revision (ICD-10) is copyrighted by the World Health Organization (WHO). The National Center for Health Statistics (NCHS) has developed a clinical modification of the classification (ICD-10-CM) for morbidity purposes.

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