

Frequently Used CPT® Codes - Hospital Outpatient & Physician

Hospital Name _____

Procedure Date _____

Physician Name _____

Procedure Start Time _____

Physician Signature _____

Procedure Length _____

Insertion or Replacement

Replacement of a pulse generator should be reported with a code for removal of the pulse generator and a code for the insertion of the pulse generator.

Bi-ventricular pacing requires the placement of a left ventricular (LV) lead, which is reported separately in addition to the single or dual chamber system.

SYSTEM (pulse generator and leads)

_____ **33249** Insertion or repositioning of electrode lead(s) for single or dual chamber pacing cardioverter defibrillator and insertion of pulse generator

PULSE GENERATOR ONLY

_____ **33240** Insertion of single or dual chamber pacing cardioverter-defibrillator pulse generator

LEAD(S)

_____ **33202** Insertion of epicardial electrode(s); open incision (e.g. thoracotomy, median sternotomy, subxiphoid approach)

_____ **33203** endoscopic approach (e.g. thoracoscopy, pericardioscopy) (when epicardial lead placement is performed by the same physician, at the same session as insertion of the generator, report 33202, 33203, in conjunction with 33212, 33213, as appropriate)

_____ **33216** Insertion of a transvenous electrode; single chamber (one electrode) permanent pacemaker or single chamber pacing cardioverter-defibrillator

_____ **33217** dual-chamber (two electrodes) permanent pacemaker or dual chamber pacing cardioverter-defibrillator (do not report 33216-3217 in conjunction with 33214)

_____ **33245** Insertion of epicardial single or dual chamber pacing cardioverter-defibrillator electrodes by thoracotomy

_____ **33224** Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, with attachment to previously placed pacemaker or pacing cardioverter-defibrillator pulse generator (including revision of pocket, removal, insertion and/or replacement of generator) (When epicardial electrode placement is performed, report 33224 in conjunction with 33202, 33203)

_____ **+33225** Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of pacing cardioverter-defibrillator or pacemaker pulse generator (including upgrade to dual-chamber system) (use in conjunction with 33206, 33207, 33208, 33212, 33213, 33214, 33216, 33217, 33222, 33233, 33234, 33235, 33240, 33249)

Removal

_____ **33241** Subcutaneous removal of single or dual chamber pacing cardioverter-defibrillator pulse generator

_____ **33238** Removal of permanent transvenous electrode(s) by thoracotomy

_____ **33243** Removal of single or dual chamber pacing cardioverter-defibrillator electrode(s); by thoracotomy

_____ **33244** by transvenous extraction

Repositioning/Repair/Revision

_____ **33215** Repositioning of previously implanted transvenous pacemaker or pacing cardioverter-defibrillator (right atrial or right ventricular) electrode

_____ **33218** Repair of single transvenous electrode for a single chamber, permanent pacemaker or single chamber pacing cardioverter-defibrillator

_____ **33220** Repair of two transvenous electrodes for a dual chamber permanent pacemaker or dual chamber pacing cardioverter-defibrillator

_____ **33223** Revision of skin pocket for single or dual chamber pacing cardioverter-defibrillator

_____ **33226** Repositioning of previously implanted cardiac venous system (left ventricular) electrode (including removal, insertion and/or replacement of generator)

Radiological Supervision & Interpretation

_____ **71090** Insertion pacemaker, fluoroscopy and radiography, radiological supervision and interpretation

+ = Add-on code. List separately in addition to code for primary procedure
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Electrophysiologic Evaluation

- _____ **93640** Electrophysiologic evaluation of single or dual chamber pacing cardioverter-defibrillator leads including defibrillation threshold evaluation (induction of arrhythmia, evaluation of sensing and pacing for arrhythmia termination) at time of initial implantation or replacement
- _____ **93641** with testing of single or dual chamber pacing cardioverter-defibrillator pulse generator
- _____ **93642** Electrophysiologic evaluation of single or dual chamber pacing cardioverter-defibrillator (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing and pacing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters)

Timing Optimization by Echocardiography

- _____ **93307** Echocardiography, transthoracic, real-time with image documentation (2D) with or without M-mode recording; complete
- _____ **93308** follow-up or limited study
- _____ **+93320** Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; complete (use in conjunction with 93303, 93304, 93307, 93308, 93312, 93314, 93315, 93317, 93350)
- _____ **+93321** follow-up or limited study (use in conjunction with 93303, 93304, 93307, 93308, 93312, 93314, 93315, 93317, 93350)
- _____ **+93325** Doppler echocardiography color flow velocity mapping (use in conjunction with 76825, 76826, 76827, 76828, 93303, 93304, 93307, 93308, 93312, 93314, 93315, 93317, 93320, 93321, 93350)

When tissue doppler imaging (TDI) is used rather than doppler color flow velocity, report unlisted cardiovascular code 93799.

Electronic Analysis

- _____ **93741** Electronic analysis of pacing cardioverter-defibrillator (includes interrogation, evaluation of pulse generator status, evaluation of programmable parameters at rest and during activity where applicable, using electrocardiographic recording and interpretation of recordings at rest and during exercise, analysis of event markers and device response); single-chamber or wearable cardioverter-defibrillator system, without reprogramming (do not report in conjunction with 93745)
- _____ **93742** single-chamber or wearable cardioverter-defibrillator system, with reprogramming (do not report in conjunction with 93745)
- _____ **93743** dual-chamber, without reprogramming
- _____ **93744** dual-chamber, with reprogramming

Modifiers

Providers can indicate that a service or procedure has been altered by a specific circumstance but has not changed in its definition or code. For example, modifiers may be used to report:

- only the professional component (-26)
- multiple procedures performed at the same session by the same provider (-51)
- that a procedure was discontinued (-53 for physician reporting; -73 or -74 for hospital reporting)

Consult the current CPT and/or HCPCS manual for a complete listing of modifiers, their definitions, and guidelines.

References

American Medical Association. Current Procedural Terminology (CPT) 2007. Professional Edition. Chicago, IL: 2007.

Important Notes

The codes provided in this document are not all-inclusive and are not intended to represent all coding options. This information does not replace the CPT codebook or coding instructions from third-party payers and governmental agencies. It is provided for informational purposes only and represents no statement, promise or guarantee by St. Jude Medical that these codes will be appropriate or that reimbursement will be made.

It is the provider's responsibility to determine and submit appropriate codes to accurately reflect services rendered. Before filing any claim, the provider should check with third-party payers to verify current coding and billing requirements. In all cases, services billed must be medically necessary, performed as reported and appropriately documented.

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