



# Catheter Ablation and Related Procedures

## FREQUENTLY USED CPT<sup>®</sup> CODES - HOSPITAL OUTPATIENT AND PHYSICIAN SERVICES

HOSPITAL NAME _____	PROCEDURE DATE _____
PHYSICIAN NAME _____	PHYSICIAN SIGNATURE _____

*This list is not inclusive of all catheter ablation and related procedure case scenarios. The document does not represent any opinion or endorsement by Abbott of any particular approach to patient management or treatment. It is provided for illustrative and educational purposes only.*

### EP STUDY

#### COMPREHENSIVE

- \_\_\_\_\_ 93619 Comprehensive electrophysiologic evaluation with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording, including insertion and repositioning of multiple electrode catheters, without induction or attempted induction of arrhythmia (Do not report in conjunction with 93600-93603, 93610, 93612, 93618, 93620-93622, or 93653-93657)
- \_\_\_\_\_ 93620 Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording (Do not report in conjunction with 93600-93603, 93610, 93612, 93618, 93619, or 93653-93657)
- \_\_\_\_\_ +93621 With left atrial pacing and recording from coronary sinus or left atrium (Use in conjunction with 93620) (Do not report in addition to 93656)
- \_\_\_\_\_ +93622 With left ventricular pacing and recording (Use in conjunction with 93620, 93653, 93656) (Do not report in addition to 93654)
- \_\_\_\_\_ +93623 Programmed stimulation and pacing after intravenous drug infusion. (List separately in addition to code for primary procedure. Use in conjunction with 93610, 93612, 93619, 93620, 93653, 93654, 93656)
- \_\_\_\_\_ 93624 Electrophysiologic follow-up study with pacing and recording to test effectiveness of therapy, including induction or attempted induction of arrhythmia.

#### LIMITED

- \_\_\_\_\_ 93600 Bundle of His recording
- \_\_\_\_\_ 93602 Intra-atrial recording
- \_\_\_\_\_ 93603 Right ventricular recording
- \_\_\_\_\_ 93610 Intra-atrial pacing
- \_\_\_\_\_ 93612 Intraventricular pacing
- \_\_\_\_\_ 93618 Induction of arrhythmia by electrical pacing

*Note: Because arrhythmia induction occurs via the same catheter(s) inserted for the electrophysiologic study(ies), catheter insertion and temporary pacemaker codes are not additionally reported.*

#### MAPPING

- \_\_\_\_\_ +93609 Intraventricular and/or intra-atrial mapping of tachycardia site(s) with catheter manipulation to record from multiple sites to identify origin of tachycardia (List separately in addition to code for primary procedure) (Use in conjunction with 93620, 93653, 93656) (Do not report in addition to 93613, 93654)
- \_\_\_\_\_ +93613 Intracardiac electrophysiologic three-dimensional mapping (Use in conjunction with 93620) (Do not report in addition to 93609, 93654)

## INTRACARDIAC CATHETER ABLATION PROCEDURES

_____	93650	Intracardiac catheter ablation of atrioventricular node function, atrioventricular conduction for creation of complete heart block, with or without temporary pacemaker placement	_____	+93657	Additional linear or focal intracardiac catheter ablation of the left or right atrium for treatment of atrial fibrillation remaining after completion of pulmonary vein isolation (Use 93657 in conjunction with 93656)
_____	93653	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including <b>intracardiac electrophysiologic 3-dimensional mapping</b> , right ventricular pacing and recording, <b>left atrial pacing and recording from coronary sinus or left atrium</b> , and His bundle recording, when performed; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry (Do not report in conjunction with 93600-93603, 93610, 93612, 93613, 93618, 93619-93621, 93654, 93656)	_____	+93462	Left heart catheterization by transseptal puncture through intact septum or by transapical puncture (List separately in addition to code for primary procedure) (Use in conjunction with (33477, 33741, 33745, 93452, 93453, 93458-93461, 93582, 93595-93597, 93653,93654) (Do not report with 93656, 93590) Do not report 93462 with, 33418, 0345T, 0544T unless transapical puncture is performed)
_____	93654	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, <b>left atrial pacing and recording from coronary sinus or left atrium</b> , and His bundle recording, when performed; with treatment of ventricular tachycardia or focus of ventricular ectopy including left ventricular pacing and recording, when performed (Do not report in conjunction with 93279-93284, 93286-93289, 93600-93603, 93609-93613, 93618--93620, 93622, 93653, 93656)	_____	+93662	Intracardiac echocardiography during therapeutic/diagnostic intervention, including imaging supervision and interpretation (List separately in addition to code for primary procedure) (Use in conjunction with 33274, 33275, 33340, 33361, 33362, 33363, 33364, 33365, 33366, 33418, 33477, 33741, 33745, 92986, 92987, 92990, 92997, 93451, 93452, 93453, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461, 93505, 93580, 93581, 93582, 93583, 93590, 93591, 93593, 93594, 93595, 93596, 93597, 93620, 93653, 93654, , 0345T, 0483T, 0484T, 0543T, 0544T, 0545T, 0795T, 0796T, 0797T, 0798T, 0799T, 0800T, 0801T, 0802T, 0803T, 0823T, 0824T, 0825T as appropriate) (Do not report 93662 in conjunction with 92961, 0569T, 0570T, 0613T)
_____	+93655	Intracardiac catheter ablation of a discrete mechanism of arrhythmia which is distinct from the primary ablated mechanism including repeat diagnostic maneuvers, to treat a spontaneous or induced arrhythmia (Use 93655 in conjunction with 93653, 93654, 93656)			
_____	93656	Comprehensive electrophysiologic evaluation including transseptal catheterizations, insertion and repositioning of multiple electrode catheters with intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation, including <b>intracardiac electrophysiologic 3-dimensional mapping</b> , <b>intracardiac echocardiography including imaging supervision and interpretation</b> , induction or attempted induction of an arrhythmia including left or right atrial pacing/recording, right ventricular pacing/recording, and His bundle recording, when performed (Do not report in conjunction with 93279, 93280, 93281, 93282, 93283,			

## ECHOCARDIOGRAPHY

**ADD-ON CODES**

Add-on codes are always performed in addition to the primary service or procedure and must never be reported as a stand-alone code. These codes are designated with the + symbol.

**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:

- Multiple procedures performed at the same session by the same provider (-51)
- That a portion of a service or procedure is reduced or eliminated at the physician's discretion (-52)

- That a procedure was discontinued (-53 for physician reporting; -73 or -74 for hospital reporting)
- That the service provided was greater than that usually required for the listed procedure (-22)
- 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). Professional Edition. Chicago, IL. at: <https://www.ama-assn.org/practice-management/cpt-current-procedural-terminology>

CPT-AMA Disclaimer

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/AMA-Disclaimer>

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