

Attention: All Providers

Prior Authorization for Non-emergency Cardiac Imaging Procedures

The N.C. Medicaid Program is considering implementation of a prior authorization (PA) program for non-emergency out-patient cardiac imaging procedures for recipients 21 years of age and older. To familiarize yourself with MedSolutions' Cardiac Imaging Guidelines, please visit the [MedSolutions website](#). DMA is requesting your input in this consideration. Please contact Diane Holder, RN, at diane.holder@dhhs.nc.gov with your concerns or questions.

[MedSolutions](#) will potentially be administering this program as well as continuing to administer the non-emergency high-tech radiology procedures and ultrasounds. Claims on authorized studies would continue to be processed by HPES. Please verify final implementation dates, which will be posted on DMA's website, before requesting authorizations for Medicaid recipients.

MedSolutions would continue to accept authorization requests by web, phone, and fax. Targeted informational training sessions will be made available to providers throughout the month of August. Check your mailboxes for MedSolutions' invitation.

N.C. Medicaid providers who will be performing the cardiac procedures in their facility will need to be credentialed. Providers will receive a letter from MedSolutions' Accuracy Assessment program advising you of this process.

Inpatient, emergency department, and emergent procedures are excluded from this program. An updated PA for imaging policy will be posted on DMA's [Radiology Services web page](#) prior to implementation.

The following codes are included in the non-emergency cardiology imaging program:

A. Cardiac Computed Tomography (CT) Scans

CPT CODE	DESCRIPTION
75572	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)
75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of LV cardiac function, RV structure and function and evaluation of venous structures, if performed)

B. Cardiac Computed Tomography Angiography (CTA)

CPT CODE	DESCRIPTION
75574	Computed tomography angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image postprocessing, (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed)

C. Cardiac Magnetic Resonance Imaging (MRI)

CPT CODE	DESCRIPTION
75557	Cardiac magnetic resonance imaging morphology and function without contrast material
75561	Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast materials (s) and further sequences

D. Cardiac Positron Emission Tomography (PET)

CPT CODE	DESCRIPTION
78459	Myocardial imaging, positron emission tomography (PET), metabolic evaluation
78491	Myocardial imaging, positron emission tomography (PET), perfusion; single study at rest or stress
78492	Myocardial imaging, positron emission tomography (PET), perfusion; multiple studies at rest or stress

E. Nuclear Cardiac Imaging (NCM)

CPT CODE	DESCRIPTION
78451	Myocardial perfusion imaging, tomographic (SPECT); including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)
78452	Myocardial perfusion imaging, tomographic (SPECT); including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection
78453	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)
78454	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection
78466	Myocardial imaging, infarct avid, planar; qualitative or quantitative
78468	Myocardial imaging, infarct avid, planar; with ejection fraction by first pass technique
78469	Myocardial imaging, infarct avid, planar; tomographic SPECT with or without quantification
78472	Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress, (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing
78473	Cardiac blood pool imaging, gated equilibrium; multiple studies, wall motion study plus ejection fraction, at rest and stress (exercise and/or pharmacologic), with or without additional quantitative processing

78481	Cardiac blood pool imaging (planar), first pass technique; single study, at rest or with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification
78483	Cardiac blood pool imaging (planar), first pass technique; multiple studies at rest and with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification
78494	Cardiac blood pool imaging (planar), gated equilibrium, SPECT, at rest, wall motion study plus ejection fraction, with or without quantitative processing
78496	Cardiac blood pool imaging, gated equilibrium, single study, at rest, with right ventricular ejection fraction by first pass technique (List separately in addition to code for primary procedure)
78499	Unlisted cardiovascular procedure, diagnostic nuclear medicine

F. Transthoracic echocardiography (TTE)

CPT CODE	DESCRIPTION
93303	Transthoracic echocardiography for congenital cardiac anomalies; complete
93304	Transthoracic echocardiography for congenital cardiac anomalies; follow-up or limited study
93306	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography
93307	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography
93308	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, follow-up or limited study

G. Transesophageal echocardiography (TEE)

CPT CODE	DESCRIPTION
93312	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report
93315	Transesophageal echocardiography for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report
93318	Echocardiography, transesophageal, (TEE) for monitoring purposes, including probe placement, real time 2-dimensional image acquisition and interpretation leading to ongoing (continuous) assessment of (dynamically changing) cardiac pumping function and to therapeutic measures on an immediate time basis

The following transesophageal echocardiography (TEE) codes do not require prior approval. However they are reimbursable only when billed with an authorized code.

CPT CODE	DESCRIPTION
93313	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); placement of transesophageal probe only
93314	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); image acquisition, interpretation and report only

93316	Transesophageal echocardiography for congenital cardiac anomalies; placement of transesophageal probe only
93317	Transesophageal echocardiography for congenital cardiac anomalies; image acquisition, interpretation and report only

H. Stress and Doppler Echocardiography

CPT CODE	DESCRIPTION
93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; (List separately in addition to codes for echocardiographic imaging); complete
93321	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; follow-up or limited study (List separately in addition to codes for echocardiographic imaging)
93325	Doppler echocardiography color flow velocity mapping (List separately in addition to codes for echocardiography)
93350	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill bicycle exercise and/or pharmacologically includes stress, with interpretation and report
93351	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically includes stress, with interpretation and report; including performance of continuous electrocardiographic monitoring, with physician supervision

The following procedure code (93352) does not require prior approval. However it is reimbursable only when billed with an authorized code.

CPT CODE	DESCRIPTION
93352	Use of echocardiographic contrast agent during stress echocardiography (List separately in addition to code for primary procedure)

I. Cardiac Catheterization

CPT CODE	DESCRIPTION
93451	Right heart catheterization including measurement(s) of oxygen saturation and cardiac output, when performed
93452	Left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed
93453	Combined right and left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed
93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation

93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial venous grafts) including intraprocedural injection(s) for bypass graft angiography
93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization
93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography and right heart catheterization
93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed
93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography
93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed
93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography
93462	Left heart catheterization by transseptal puncture through intact septum or by transapical puncture (List separately in addition to code for primary procedure)
93530	Right heart catheterization, for congenital cardiac anomalies
93531	Combined right heart catheterization and retrograde left heart catheterization, for congenital cardiac anomalies
93532	Combined right heart catheterization and transseptal left heart catheterization through intact septum with or without retrograde left heart catheterization, for congenital cardiac anomalies
93533	Combined right heart catheterization and transseptal left heart catheterization through existing septal opening, with or without retrograde left heart catheterization, for congenital cardiac anomalies

The following procedure codes (93463 and 93464) do not require prior approval. However they are reimbursable only when billed with an authorized code.

CPT CODE	DESCRIPTION
93463	Pharmacologic agent administration (eg, inhaled nitric oxide, intravenous infusion of nitroprusside, dobutamine, milrinone, or other agent), including assessing hemodynamic measurements before, during, after and repeat pharmacologic agent administration, when performed (List separately in addition to code for primary procedure)
93464	Physiologic exercise study (eg, bicycle or arm ergometry) including assessing hemodynamic measurements before and after (List separately in addition to code for primary procedure)

J. Injection Procedures

The following injection procedure codes do not require prior approval. However they are reimbursable only when billed with an authorized code.

CPT CODE	DESCRIPTION
93563	Injection procedure during cardiac catheterization including imaging supervision, interpretation and report; for selective coronary angiography during congenital heart catheterization (List separately in addition to code for primary procedure)
93564	Injection procedure during cardiac catheterization including imaging supervision, interpretation and report; for selective opacification of aortocoronary venous or arterial bypass graft(s) (eg, aortocoronary saphenous vein, free radial artery, or free mammary artery graft) to one or more coronary arteries and in situ arterial conduits, (eg, internal mammary), whether native or used for bypass to one or more coronary arteries during congenital heart catheterization, when performed (List separately in addition to code for primary procedure)
93565	Injection procedure during cardiac catheterization including imaging supervision, interpretation and report; for selective left ventricular or left atrial angiography (List separately in addition to code for primary procedure)
93566	Injection procedure during cardiac catheterization including imaging supervision, interpretation and report; for selective right ventricular or right atrial angiography (List separately in addition to code for primary procedure)
93567	Injection procedure during cardiac catheterization including imaging supervision, interpretation and report; for supraaortic aortography (List separately in addition to code for primary procedure)
93568	Injection procedure during cardiac catheterization including imaging supervision, interpretation and report; for pulmonary angiography (List separately in addition to code for primary procedure)

K. Injection Procedures

The following radiopharmaceutical procedure codes do not require prior approval. However they are reimbursable only when billed with an authorized code.

HCPCS CODE	DESCRIPTION
A9500	Technetium Tc-99m sestamibi, diagnostic, per study dose
A9501	Technetium Tc-99m teboroxime, diagnostic, per study dose
A9502	Technetium Tc-99m tetrofosmin, diagnostic, per study dose
A9504	Technetium TC-99m apcitide, diagnostic, per study dose, up to 20 millicuries
A9505	Thallium Tl-201 thallos chloride, diagnostic, per millicurie
A9512	Technetium Tc-99m pertechnetate, diagnostic, per millicurie
A9524	Iodine I-131 iodinated serum albumin, diagnostic, per 5 microcuries
A9526	Nitrogen N-13 ammonia, diagnostic, per study dose, up to 40 millicuries
A9538	Technetium Tc-99m pyrophosphate, diagnostic, per study dose, up to 25 millicuries
A9552	Fluorodeoxyglucose F-18 FDG, diagnostic, per study dose, up to 45 millicuries
A9555	Rubidium Rb-82, diagnostic, per study dose, up to 60 millicuries
A9560	Technetium Tc-99m labeled red blood cells, diagnostic, per study dose, up to 30 millicuries
A9576	Injection, gadoteridol, (ProHance Multipack), per ml
A9577	Injection, gadobenate dimeglumine (MultiHance), per ml
A9578	Injection, gadobenate dimeglumine (MultiHance Multipack), per ml
A9579	Injection, gadolinium-based magnetic resonance contrast agent, not otherwise specified, per ml
A9700	Supply of injectable contrast material for use in echocardiography, per study
J0152	Injection, adenosine, for diagnostic use, 30 mg
J1245	Injection, dipyridamose, per 10 mg (Persantin®)
J1250	Injection, dobutamine HCL, per 250 mg (Dobutamine®)
J2785	Injection, regadenoson, 0.1 mg
Q9951	Low osmolar contrast material, 400 or greater mg/ml iodine concentration, per ml
Q9957	Injection, perflutren lipid microspheres, per ml (Definity®)
Q9965	Low osmolar contrast material, 100-199 mg/ml iodine concentration, per ml (Omnipaque®, Optiray®, Ultravist®)
Q9966	Low osmolar contrast material, 200-299 mg/ml iodine concentration, per ml (Isovue®, Omnipaque®, Optiray®, Ultravist®, Visipaque®)
Q9967	Low osmolar contrast material, 300-399 mg/ml iodine concentration, per ml (Hexabrix®, Isovue®, Omnipaque®, Optiray®, Oxilan®, Ultravist®, Visipaque®)

L. Revenue Codes

Institutional providers billing on a UB claim, shall bill the revenue code (RC) with the exact CPT code.

REVENUE CODE	DESCRIPTION
480	Cardiology; General Classification
481	Cardiology; Cardiac Cath Lab
482	Cardiology; Stress Test
483	Cardiology; Echocardiology
489	Cardiology; Other Cardiology

Practitioner and Clinic Services
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