

Reimbursement Policy Statement Illinois Medicaid

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|-----------------------|---------------------------|-----------------------------------|----------------------|
| Effective Date | Next Annual Review | Policy Number | |
| 12/01/2020 | 07/01/2026 | ABHIL-RP-0019 | |
| Policy Name | | Department | |
| Holter Monitors | | Claims Operations Medical Payment | |
| Policy Type | | | |
| Medical | Administrative | Pharmacy | Reimbursement |

Aetna Better Health® of Illinois (ABH IL) implements comprehensive and robust policies and procedures to ensure alignment with Illinois Department of Health Care and Family Services (HFS) and to warrant that regulatory standards are met.

ABH IL reimbursement policies are intended to provide a general reference for claims filing, coding, documentation guidelines and administrative functions. Providers are ultimately responsible for submission of accurate reporting of services provided.

Reimbursement of reported services is subject to member benefit, eligibility on date of service, medical necessity, related plan policies and procedures, correct coding and clinical editing logic, provider contracts and all applicable plan documentation and guidelines set forth by Illinois Department of Health Care and Family Services (HFS). Coding methodology, regulatory requirements, industry standard claims logic, guidance from specialty organizations and other factors are considered in the development of plan policies. ABH IL retains the right to change, amend or withdraw this policy as needed, at any time.

CONTENTS OF POLICY:

| | |
|---------------------------------|---|
| Reimbursement Policy Statement | 1 |
| Table of Contents | 1 |
| A. Policy | 2 |
| B. Overview | 2 |
| C. Definitions | 2 |
| D. Reimbursement Guidelines | 3 |
| E. Codes/Conditions of Coverage | 3 |
| F. Frequently Asked Questions | 5 |
| G. Review/Revision History | 5 |
| H. Resources | 5 |

A. Policy

This policy is provided as a guide to medical coding and editing guidelines for the appropriate reporting of Holter monitoring. This guidance aligns with AMA CPT Coding Guidelines, ICD-10-CM Coding Guidelines and Aetna Clinical Policy for Holter monitors.

B. Overview

This policy outlines the coding and editing guidelines for Holter monitoring. A Holter monitor is a small, portable device that records the heart's electrical activity (heartbeat) continuously for 24–48 hours or sometimes longer. Holter monitoring is conducted to check for irregular heart rhythms, evaluate symptoms like dizziness, fainting or palpitations or to monitor the effectiveness of certain treatments. This policy applies to all professional and facility claim types.

C. Definitions

| Term | Definition |
|--|--|
| Aetna Better Health of Illinois (ABHIL) | A subsidiary of CVS Health Corporation, Medicaid subsidiary that provides plan management and other administrative services for the Illinois Medicaid program. |
| American Medical Association (AMA) | A professional group that publishes research to advance public health and advocates for the interests of registered physician-members. |
| Centers for Medicare & Medicaid Services (CMS) | The federal agency that administers the Medicare program as well as works with the individual states to administer state Medicaid and Children's Health Insurance Programs. |
| Current Procedural Terminology (CPT) | A medical code set maintained by the American Medical Association through the CPT Editorial Panel. The CPT code set (copyright protected by the AMA) describes medical, surgical, and diagnostic services and is designed to communicate uniform information about medical services and procedures among physicians, coders, patients, accreditation organizations, and payers for administrative, financial, and analytical purposes. |
| Illinois Department of Health Care and Family Services (HFS) | The Department of Healthcare and Family Services administers health insurance programs for children, pregnant women, and adults who are residents of Illinois. |
| International Statistical Classification of Diseases (ICD-10-CM) | The 10th revision of the (ICD), a medical classification list by the World Health Organization (WHO). It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases. |



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| Medicaid | The state administered program that provides health coverage to millions of Americans, including eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities, according to federal requirements. The program is funded jointly by states and the federal government. |
| Medicare | Medicare is a health insurance program for: people aged sixty-five (65) or older, people under age sixty-five (65) with certain disabilities, and people of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant). |

D. Reimbursement Guidelines

ABH IL will only reimburse for the appropriate reporting of Holter monitoring when

- Services are reported with an ICD-10-CM diagnosis code that indicates a cardiac symptom or event as listed in this policy.

Claims that are submitted will be denied when

- services are reported without an ICD-10-CM diagnosis code that does not indicate a cardiac symptom or event.

The medical record documentation is expected to support the specific CPT code(s) and ICD-10-CM codes reported.

E. Codes/Condition of Coverage

CPT Codes

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| 93224 | External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation by a physician or other qualified health care professional |
| 93225 | External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; recording (includes connection, recording, and disconnection) |
| 93226 | External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; scanning analysis with report |
| 93227 | External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; review and interpretation by a physician or other qualified health care professional |

Supported ICD-10-CM Codes

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| E10.40- E10.49 | Type 1 diabetes mellitus with neurological complications |
| E10.610 | Type 1 diabetes mellitus with diabetic neuropathic arthropathy |
| E11.40- E11.49 | Type 2 diabetes mellitus with neurological complications |
| E11.610 | Type 2 diabetes mellitus with diabetic neuropathic arthropathy |
| F45.8 | Other somatoform disorders |
| G45.0 | Vertebro-basilar artery syndrome |
| G45.1 | Carotid artery syndrome (hemispheric) |
| G45.9 | Transient cerebral ischemic attack, unspecified |
| G99.0 | Autonomic neuropathy in diseases classified elsewhere |
| I20.0 | Unstable angina |
| I20.1 | Angina pectoris with documented spasm |
| I21.01- I21.A9 | Acute myocardial infarction |
| I22.0- I22.9 | Subsequent ST elevation (STEMI) and non-ST elevation (NSTEMI) myocardial infarction |
| I24.0- I24.9 | Other acute ischemic heart diseases |
| I25.2 | Old myocardial infarction |
| I42.0 | Dilated cardiomyopathy |
| I42.1 | Obstructive hypertrophic cardiomyopathy |
| I42.2 | Other hypertrophic cardiomyopathy |
| I44.0- I44.7 | Atrioventricular and left bundle-branch block |
| I45.0- I45.9 | Other conduction disorders |
| I46.2- I46.9 | Cardiac arrest |
| I47.0- I47.9 | Paroxysmal tachycardia |
| I48.0- I48.92 | Atrial fibrillation and flutter |
| I49.01- I49.9 | Other cardiac arrhythmias |



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| I63.00- I63.9 | Cerebral infarction |
| I67.841- I67.848 | Cerebral vasospasm and vasoconstriction |
| Q24.6 | Congenital heart block |
| R00.0 | Tachycardia, unspecified |
| R00.1 | Bradycardia, unspecified |
| R00.2 | Palpitations |
| R42 | Dizziness and giddiness |
| R55 | Syncope and collapse |
| Z95.0 | Presence of cardiac pacemaker |
| Z95.810 | Presence of automatic (implantable) cardiac defibrillator |

F. Frequently Asked Questions

N/A

G. Review/Revision Date

| Action | Date | Comments |
|----------------|------------|---|
| Revision | 02/02/2026 | Policy template updated, diagnosis codes reviewed; no other content changes |
| Review | 08/22/2025 | Review- No content changes |
| Effective Date | 12/01/2020 | |

H. Resources

1. Aetna. *Holter Monitors*. Clinical Policy Bulletin 0019. July 1995. Updated February 2025.
2. American Medical Association. *CPT Professional Edition 2025, AMA; 2024.*
3. American Medical Association. *ICD-10-CM 2025 the Complete Official Codebook, AMA; 2024.*