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Medicare Advantage Policy Manual

Policy ID: M-MED21

Signal-Averaged Electrocardiography (SAECG)

Published: 06/01/2022

Next Review: 04/2023

Last Review: 03/2022

Medicare Link(s) Revised: 06/01/2022

IMPORTANT REMINDER

The Medicare Advantage Medical Policy manual is not intended to override the member Evidence of Coverage (EOC), which defines the insured's benefits, nor is it intended to dictate how providers are to practice medicine. Physicians and other health care providers are expected to exercise their medical judgment in providing the most appropriate care for the individual member, including care that may be both medically reasonable and necessary.

The Medicare Advantage medical policies are designed to provide guidance regarding the decision-making process for the coverage or non-coverage of services or procedures in accordance with the member EOC and Centers of Medicare and Medicaid Services (CMS) policies and manuals, along with general CMS rules and regulations. In the event of a conflict, applicable CMS policy or EOC language will take precedence over the Medicare Advantage Medical Policy. In the absence of a specific CMS coverage determination for a requested service, item or procedure, the health plan may apply CMS regulations, as well as their Medical Policy Manual or other applicable utilization management vendor criteria developed with an objective, evidence-based process using scientific evidence, current generally accepted standards of medical practice, and authoritative clinical practice guidelines.

Some services or items may appear to be medically indicated for an individual, but may be a direct exclusion of Medicare or the member's benefit plan. Medicare and member EOCs exclude from coverage, among other things, services or procedures considered to be investigational (experimental) or cosmetic, as well as services or items considered not medically reasonable and necessary under Title XVIII of the Social Security Act, §1862(a)(1)(A). In some cases, providers may bill members for these non-covered services or procedures. Providers are encouraged to inform members in advance when they may be financially responsible for the cost of non-covered or excluded services. Members, their appointed representative, or a treating provider can request coverage of a service or item by submitting a pre-service organization determination prior to services being rendered.

DESCRIPTION

Signal-averaged electrocardiography (SAECG) is a technique involving computerized analysis of small segments of a standard ECG to detect abnormalities that would be otherwise obscured by "background" skeletal muscle activity.

MEDICARE ADVANTAGE POLICY CRITERIA

Note: This policy does not address T-wave alternans. T-wave alternans is another technique for risk stratification, which; it measures beat-to-beat variability, while SAECG measures beat-averaged conduction.

CMS Coverage Manuals* None

National Coverage Determinations (NCDs)*	<i>Electrocardiographic Services</i>	NCD 20.15 (Section B.1.)
Noridian Healthcare Solutions (Noridian) Local Coverage Determinations (LCDs) and Articles (LCAs)*	<i>Electrocardiograms –</i> Provides additional criteria for ECGs.	LCD L37283

POLICY GUIDELINES

REQUIRED DOCUMENTATION

The information below **must** be submitted for review to determine whether policy criteria are met. If any of these items are not submitted, it could impact our review and decision outcome:

- All pertinent medical records and clinical documentation, detailing what actionable data the SAECG will provide; and,
- Medical condition or indication being treated.

CROSS REFERENCES

None

REFERENCES

None

CODING

Codes	Number	Description
CPT	93278	Signal-averaged electrocardiography (SAECG) with or without ECG
HCPCS	None	

***IMPORTANT NOTE:** Medicare Advantage medical policies use the most current Medicare references available at the time the policy was developed. Links to Medicare references will take viewers to external websites outside of the health plan's web control as these sites are not maintained by the health plan.