

Internal Medicine Coding Alert

READER QUESTION: Stop Stressing Over ECGs

Question: Our internist performed an electrocardiogram (ECG) prior to giving the patient a stress test. Should I report both procedures?

Alabama Subscriber

Answer: Yes, you may report the ECG with 93000 (Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report) and the stress test with 93015 (Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; with physician supervision, with interpretation and report). If your doctor did not provide the interpretation and report, use 93016 (physician supervision only, without interpretation and report).

Most payers will cover an ECG when the physician uses it as a diagnostic tool before performing the stress test. For instance, your physician wants to confirm a diagnosis of coronary artery disease, such as 414.9 (Chronic ischemic heart disease, unspecified). He or she relies on the patient's history, an ECG and symptoms of chest pain.

Some physicians inappropriately bill for ECGs during the stress test, and in that case, the National Correct Coding Initiative bundles the ECG into the stress test. To properly indicate an ECG performed prior to a stress test as a diagnostic procedure, append modifier -59 (Distinct procedural service) to the ECG.