

Internal Medicine Coding Alert

READER QUESTIONS: Break Down Hospital Stress Test

Question: A patient complains of chest pain (786.50) and heart palpitations (785.1). The internist uses the hospital's equipment to perform a cardiac stress test. The physician supervises the stress test, interprets the results and issues a written report. Should I assign 93015?

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Answer: No. You should reserve the global cardiovascular stress test code 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) for when the internist furnishes all three components of the procedure. That means the physician:

- 1. supervises the stress test
- 2. interprets the test's results and issues a written report
- 3. owns (or his practice owns) the equipment.

Because 93015 requires furnishing the technical portion of the procedure, you shouldn't use the global code unless you're coding for the provider, such as an IM office, that owns the stress test machine. When the internist instead performs the test at a hospital, the facility bills for the technical portion with 93017 (... tracing only, without interpretation and report). You should then code the individual components that your physician provides.

In your scenario, you should report the physician supervision with 93016 (Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; physician supervision only, without interpretation and report). Code the written interpretation and report using 93018 (... interpretation and report only).