Sentara Health Plans

Medicaid

Mobile Cardiac Telemetry, Medical 112

Table of Content

Description & Definitions
Criteria
Document History
Coding
Special Notes
References
Keywords

Implementation	8/1/2026
Next Review Date	4/2027
Coverage Policy	Medical 112
Version	9

All requests for authorization for the services described by this medical policy will be reviewed per Early and Periodic Screening, Diagnostic and Treatment (EPSDT) guidelines. These services may be authorized under individual consideration for Medicaid members under the age of 21-years if the services are judged to by medically necessary to correct or ameliorate the member's condition. Department of Medical Assistance Services (DMAS), Supplement B - EPSDT (Early and Periodic Screening, Diagnosis and Treatment) Manual.*.

Description & Definitions:

Mobile Cardiac Telemetry (MCT) consists of a wearable cardiac monitor that gathers EKG data on a real time basis that includes heart activity, to detect and manage cardiac events. The information requires a 24-hour, attended monitoring station to receive transmissions and/or stored when patient or event is signaled enabling timely intervention.

Mobile Cardiac Outpatient Telemetry (MCOT) was initially developed as part of the CardioNet system and is a trademarked name that was used as a universal designation. The term Mobile Cardiac Telemetry (MCT) has subsequently become the standard designation due to trademark issues.

- Using a combination of software algorithms and in person analysis suspected rhythm abnormalities can be evaluated real time if necessary. Arrangements are made for the results to be sent to either a physician associated with the monitoring company or to the physician of record or his designee on a real time basis if certain criteria are met.

Other common names: MCT, MCOT, ECAT (External Cardiac Ambulatory Telemetry), CardioNet, Lifewatch ACT monitor - Ambulatory Cardiac Telemetry, Ambulatory ECG (AECG) telemetry, Cardiac Event Detection (CED), remote Cardiac Monitoring, Outpatient Cardiac Telemetry, NUVANT Mobile Cardiac Telemetry (MCT) System, KardiaMobile 6L, Zio AT (iRhythm), HEARTLink

Criteria:

Mobile cardiac telemetry(MCT) /MCOT is considered medically necessary for individuals with **1 or more** of the following:

- **Post transcatheter aortic valve replacement** (TAVR) with subsequent bundle branch block development

- **Cryptogenic cerebrovascular accident** (CVA), atrial fibrillation or similar types of atrial tachyarrhythmias (ATAF) surveillance where an implantable loop recorder has not andwill not be employed
- Individual with **unexplained (after cardiac evaluation) syncope** not felt to need inpatient evaluation but with clinical indications they may be at demonstrable risk of suddendeath from a dysrhythmia that requires real time attended mobile cardiac telemetry and immediate real time evaluation of captured dysrhythmias and physiciannotification.
- Individual with **structural heart disease** and clinical indications that they may be at demonstrable risk of sudden cardiac death from a dysrhythmia that requires real timeattended mobile cardiac telemetry and immediate real time evaluation of captured dysrhythmias and physician notification.

Mobile cardiac telemetry/MCOT is considered **not medically necessary** for any use other than those indicated in clinical criteria.

Document History:

Revised Dates:

- 2020: August, December
- 2015: February
- 2014: November
- 2013: March, June
- 2012: February, April
- 2011: June
- 2010: June
- 2009: June

Reviewed Dates:

- 2026: April – Implementation date of August 1, 2026. Annual review. No changes to criteria.
- 2025: April – Implementation date of July 1, 2025. No changes references updated
- 2024: April
- 2023: August
- 2022: July
- 2021: August
- 2019: December
- 2018: September
- 2017: November
- 2016: September
- 2015: August
- 2011: February

Origination Date: March 2008

Mobile Cardiac Telemetry (MCT) is considered **not medically necessary** for uses other than those listed in the clinical criteria.

Coding:

Medically necessary with criteria:

Coding	Description
93228	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days: review and interpretation with report by a physician or other qualified health care professional
93229	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; technical support for connection and patient instructions for use, attended surveillance, analysis and transmission of daily and emergent data reports as prescribed by a physician or other qualified health care professional

Considered Not Medically Necessary:

Coding	Description
	None

U.S. Food and Drug Administration (FDA) - approved only products only.

The preceding codes are included above for informational purposes only and may not be all inclusive. Additionally, inclusion or exclusion of a treatment, procedure, or device code(s) does not constitute or imply member coverage or provider reimbursement.

Special Notes: *

- Coverage
  - See the appropriate benefit document for specific coverage determination. Member specific benefits take precedence over medical policy.
- Application to products
  - Policy is applicable to Sentara Health Plan Virginia Medicaid products.
- Authorization requirements
  - Pre-certification by the Plan is required.
- Special Notes:
  - Medicaid
    - This medical policy express Sentara Health Plan's determination of medically necessity of services, and they are based upon a review of currently available clinical information. These policies are used when no specific guidelines for coverage are provided by the Department of Medical Assistance Services of Virginia (DMAS). Medical Policies may be superseded by state Medicaid Plan guidelines. Medical policies are not a substitute for clinical judgment or for any prior authorization requirements of the health plan. These policies are not an explanation of benefits.
    - Medical policies can be highly technical and complex and are provided here for informational purposes. These medical policies are intended for use by health care professionals. The medical policies do not constitute medical advice or medical care. Treating health care professionals are

solely responsible for diagnosis, treatment and medical advice. Sentara Health Plan members should discuss the information in the medical policies with their treating health care professionals. Medical technology is constantly evolving and these medical policies are subject to change without notice, although Sentara Health Plan will notify providers as required in advance of changes that could have a negative impact on benefits.

- The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) covers services, products, or procedures for children, if those items are determined to be medically necessary to "correct or ameliorate" (make better) a defect, physical or mental illness, or condition (health problem) identified through routine medical screening or examination, regardless of whether coverage for the same service or support is an optional or limited service under the state plan. Children enrolled in the FAMIS Program are not eligible for all EPSDT treatment services. All requests for authorization for the services described by this medical policy will be reviewed per EPSDT guidelines. These services may be authorized under individual consideration for Medicaid members under the age of 21-years if the services are judged to by medically necessary to correct or ameliorate the member's condition. Department of Medical Assistance Services (DMAS), Supplement B - EPSDT (Early and Periodic Screening, Diagnosis and Treatment) Manual.

References:

2017 ISHNE-HRS expert consensus statement on ambulatory ECG and external cardiac monitoring/telemetry. (2018, 6). Retrieved 3 2026, from Heart Rhythm Society (HRS): https://www.heartrhythmjournal.com/article/s1547-5271(17)30415-0/fulltext

(2026). Retrieved 3 2026, from DMAS: https://www.dmas.virginia.gov/for-providers/rates-and-rate-setting/procedure-fee-files-cpt-codes/

(2026). Retrieved 3 2026, from Hayes: https://evidence.hayesinc.com/search?q=%257B%2522text%2522:%2522mobile%2520cardiovascular%2520outpatient%2520telemetry%2522,%2522title%2522:null,%2522termsource%2522:%2522searchbar%2522,%2522page%2522:%257B%2522page%2522:0,%2522size%2522:50%257D,%2522type

(2026). Retrieved 3 2026, from EviCore: https://www.evicore.com/solutions/health-plan/utilization-management/cardiovascular

29th Edition. (2026). Retrieved 3 2026, from MCG: https://careweb.careguidelines.com/ed29/

Ambulatory ECG monitoring. (2024, 11). Retrieved 3 2026, from UpToDate: https://www.uptodate.com/contents/ambulatory-ecg-monitoring?search=External%20mobile%20cardiovascular%20telemetry&source=search_result&selectedTitle=1~150&usage_type=default&display_rank=1

LCD Cardiac Event Detection (L34573) Palmetto GBA. (2024, 3). Retrieved 3 2026, from CMS: https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdId=34573&ver=28

NCD Electrocardiographic Services (20.15). (2004). Retrieved 3 2026, from CMS: https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=179&ncdver=2&bc=0

Task Force on Clinical Practice Guidelines - Cardiac Mobile Outpatient Telemetry (CMOT). (2022, 4). Retrieved 3 2026, from American College of Cardiology/American Heart Association (ACC/AHA): https://www.healthhelp.com/wp-content/uploads/P_9846.pdf

Keywords:

SHP Mobile Cardiac Telemetry, MCOT, SHP Medical 112, ablative procedures, arrhythmias, MCT, MCOT, ECAT (External Cardiac Ambulatory Telemetry), CardioNet, Lifewatch ACT monitor - Ambulatory Cardiac Telemetry, Ambulatory ECG (AECG) telemetry, Cardiac Event Detection (CED), remote Cardiac Monitoring, Outpatient Cardiac Telemetry, NUVANT