



Physician and Staffing Requirements for External Counter Pulsation

Coding Guidelines:

- ICD-9 code (Angina) 413.0, 413.9, 413.0 must be primary diagnosis.
- When billing Medicare you cannot bill any other code with (G0166).
- G0166 is a bundled code including: ECP, O₂ sats, ECG, BP check and physiologic waveform (finger pleth).
- The full course of ECP therapy consists of the maximum number of 35 one-hour treatments.
- If performed twice per day, CPT code 93799/G0166 may be billed with 2 units of service.

Staffing Requirements:

- The treatment must be performed under the direct supervision of a physician. The physician must be present in the office suite and immediately available to furnish assistance and direction throughout the performance of the procedure.
- ECP therapist must be trained and certified in External Counter Pulsation.
- ECP therapist must have at least 2-3 years cardiology experience and be able to detect arrhythmias such as: PVC's, PAC's, Atrial Fibrillation, Couplets, Bradycardia, Tachycardia, Supraventricular Tachycardia (SVT), and bundle branch block. The therapist is required to understand and detect the changes in physiology and kinetic changes during therapy.
- Your ECP program is required to have at least one other member of your staff trained by your "Lead" ECP technician for back-up or staffing turn-over.

Utilization Guidelines:

- ECP patients must be refractive to medical therapy and not readily amenable to surgical intervention.
- The full course of therapy consists of the maximum number of 35 one-hour treatments. Additional treatments will need medical necessity.

Billing Non-Medicare Insurers - CPT codes are:

- 92971- External method of ECP
- 93922- Non-invasive physiologic study (finger pleth)
- 93041- 3 lead continuous ECG
- 99211- non physician code (therapist)

Primary ICD-9 code: (Angina) 413.0, 413.9, 413.0

National Average Payment for ECP (G0166) = \$138.34 per hour of ECP.