

UnitedHealthcare commercial and Individual Exchange plans - cardiology notification and prior authorization

Electrophysiology implant CPT code classification table

The following table contains the CPT® codes that require notification or prior authorization for UnitedHealthcare commercial and Individual Exchange plan members. Notification and prior authorization numbers represent the specific procedure requested and are valid for 45 calendar days from the date they are issued. To verify specific notification or prior authorization requirements by member, please call **866-889-8054**.

CPT code	CPT description	Includes generator placement	Includes lead placement	Includes removal of existing device	Device type
33206	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial	Yes	Yes	No	Pacemaker
33207	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); ventricular	Yes	Yes	No	Pacemaker
33208	Insertion of new or replacement of permanent pacemaker with transvenous with transvenous electrode(s); atrial and ventricular	Yes	Yes	No	Pacemaker/ CRT
33212	Insertion of pacemaker pulse generator only; with existing single lead	Yes	No	No	Pacemaker
33213	Insertion of pacemaker pulse generator only; with existing dual leads	Yes	No	No	Pacemaker
33214	Upgrade of implanted pacemaker system, conversion of single chamber system to dual chamber system (includes removal of previously placed pulse generator, testing of existing lead, insertion of new lead, insertion of new generator)	Yes	Yes	Yes	Pacemaker
33221	Insertion of pacemaker pulse generator only; with existing multiple leads	Yes	No	No	CRT
33224	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, with attachment to previously placed pacemaker or implantable defibrillator pulse generator (including revision of pocket, removal, insertion and/or replacement of existing generator)	Yes	Yes	Yes	CRT

CPT code	CPT description	Includes generator placement	Includes lead placement	Includes removal of existing device	Device type
33225	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defibrillator or pacemaker pulse generator (e.g., for upgrade to dual chamber system) (list separately in addition to code for primary procedure)	Yes	Yes	No	CRT
33227	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; single lead system	Yes	No	Yes	Pacemaker
33228	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator, dual lead system	Yes	No	Yes	Pacemaker
33229	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator, multiple lead system	Yes	No	Yes	CRT
33230	Insertion of implantable defibrillator pulse generator only; with existing dual leads	Yes	No	No	ICD
33231	Insertion of implantable defibrillator pulse generator only; with existing multiple leads	Yes	No	No	CRT
33240	Insertion of implantable defibrillator pulse generator only; with existing single lead	Yes	No	No	ICD
33249	Insertion or replacement of permanent implantable defibrillator system, with implantable defibrillator pulse generator; single or dual chamber	Yes	Yes	No	ICD/CRT
33262	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; single lead system	Yes	No	Yes	ICD
33263	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; dual lead system	Yes	No	Yes	ICD
33264	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; multiple lead system	Yes	No	Yes	ICD
33270	Insertion or replacement of permanent subcutaneous implantable defibrillator system, with subcutaneous electrode, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters, when performed	Yes	No	Yes	ICD
0571T	Insertion or replacement of implantable cardioverter defibrillator system with substernal electrode(s), including all imaging guidance and electrophysiological evaluation (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters), when performed	Yes	No	No	ICD
0614T	Removal and replacement of substernal implantable defibrillator pulse generator	Yes	No	Yes	ICD



Diagnostic catheterization CPT code classification table

The following table contains the CPT codes that require notification or prior authorization. Notification and prior authorization numbers represent the specific procedure requested and are valid for 45 calendar days from the date they are issued. To verify specific notification or prior authorization requirements by member, please call **866-889-8054**.

CPT code	CPT description
93452	Left heart catheterization, including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed
93453	Combined right and left heart catheterization, including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed
93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation
93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial venous grafts), including intraprocedural injection(s) for bypass graft angiography
93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization
93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts), including intraprocedural injection(s) for bypass graft angiography and right heart catheterization
93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization, including intraprocedural injection(s) for left ventriculography, when performed
93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization, including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography
93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization, including intraprocedural injection(s) for left ventriculography, when performed
93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization, including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography

Echocardiography and stress echocardiography CPT code classification table

The following table contains the CPT codes that require prior authorization. Prior authorization numbers represent the specific procedure requested and are valid for 45 calendar days from the date they are issued. To verify specific notification or prior authorization requirements by member, please call **866-889-8054**.

CPT code	CPT description
93306	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography
93307	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography
93308	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, follow-up or limited study
93319	3D echocardiographic imaging and postprocessing during transesophageal echocardiography, or during transthoracic echocardiography for congenital cardiac anomalies, for the assessment of cardiac structure(s) (e.g., cardiac chambers and valves, left atrial appendage, interatrial septum, interventricular septum) and function, when performed (list separately in addition to code for echocardiographic imaging).
93350	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report
93351	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically-induced stress, with interpretation and report; including performance of continuous electrocardiographic monitoring, with supervision by a physician or other qualified health care professional

Diagnostic catheterization CPT code crosswalk table

The following table contains CPT codes that are interchangeable for notification or prior authorization. If you receive notification or prior authorization for a procedure that corresponds with the crosswalk table, then the substitution is appropriate. To verify specific notification or prior authorization status by member, please call **866-889-8054**.

Diagnostic catheterization crosswalk – Prior authorization given with this CPT code			
CPT code	CPT description	Claim submitted with this CPT code will be allowed	
93452	Left heart catheterization, including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	93453–93461	Various descriptions – see page 3
93453	Combined right and left heart catheterization, including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	93452; 93454–93461	Various descriptions – see page 3
93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation	93452–93453; 93455–93461	Various descriptions – see page 3

Diagnostic catheterization crosswalk – Prior authorization given with this CPT code

CPT code	CPT description	Claim submitted with this CPT code will be allowed	
93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial venous grafts), including intraprocedural injection(s) for bypass graft angiography	93452–93454; 93456–93461	Various descriptions – see page 3
93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization	93452–93455; 93457–93461	Various descriptions – see page 3
93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts), including intraprocedural injection(s) for bypass graft angiography and right heart catheterization	93452–93456; 93458–93461	Various descriptions – see page 3
93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization, including intraprocedural injection(s) for left ventriculography, when performed	93452–93457; 93459–93461	Various descriptions – see page 3
93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization, including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	93452–93458; 93460–93461	Various descriptions – see page 3
93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) 93460 for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization, including intraprocedural injection(s) for left ventriculography, when performed	93452–93459; 93461	Various descriptions – see page 3
93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization, including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	93452–93460	Various descriptions – see page 3

Please note: There are no substitute CPT codes for electrophysiology implant procedures.



Echocardiogram crosswalk table

The following table contains CPT codes that are interchangeable for prior authorization. If you receive prior authorization for a procedure that corresponds with the crosswalk table, then the substitution is appropriate. To verify specific notification or prior authorization status by member, please call **866-889-8054**.

Prior authorization given with this CPT code			
CPT code	CPT description	Claim submitted with this CPT code will be allowed	
93306	Echocardiography, transthoracic, real-time w/image documentation, includes M-mode recording, when performed, complete, with spectral Doppler echocardiography, and w/color flow Doppler echocardiography	93306–93308	Various descriptions – see page 4
93307	Echocardiography, transthoracic, real-time with image documentation (2D) includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	93306–93308	Various descriptions – see page 4
93308	Echocardiography, transthoracic, real-time with image documentation (2D) includes M-mode recording, when performed, follow-up or limited study	93306–93307	Various descriptions – see page 4
93350	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation	93351	Various descriptions – see page 4
93351	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation	93350	Various descriptions – see page 4

Please note: There are no substitute CPT codes for electrophysiology implant procedures.

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