



REIMBURSEMENT POLICY STATEMENT INDIANA MARKETPLACE PLANS

Policy Name	Policy Number	Effective Date
Emergency Department Electrocardiogram (EKG/ECG) Interpretation	PY-0788	07/01/2019
Policy Type		

A. Subject



1. Example: 93010 is received and reimbursed. Another 93010 is completed and submitted for reimbursement. The second 93010 has modifier 76 or 77 (whichever is applicable) appended (93010-76 or 93010-77) to distinguish between the first and second EKG performed on the same member on the same date of service.
- III. CareSource expects providers to work with other departments, within their organization, to determine which department will submit the claim to prevent duplicate claim submissions.

E. Conditions of Coverage

Reimbursement is dependent on, but not limited to, submitting Centers for Medicare and Medicaid Services (CMS) approved HCPCS and CPT codes along with appropriate modifiers, if applicable. Please refer to the individual CMS fee sch (en)4.006o(r)-2. tC ofp p



