

Transesophageal and Transthoracic Echocardiogram



INDEPENDENT CARE HEALTH PLAN

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Medicare Advantage Medical Coverage Policy

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Disclaimer

The Coverage Summaries are reviewed by the iCare Medicare Utilization Management Committee. Policies in this document may be modified by a member's coverage document. Clinical policy is not intended to preempt the judgment of the reviewing medical director or dictate to health care providers how to practice medicine. Health care providers are expected to exercise their medical judgment in rendering appropriate care. Identification of selected brand names of devices, tests and procedures in a medical coverage policy is for reference only and is not an endorsement of any one device, test, or procedure over another. Clinical technology is constantly evolving, and we reserve the right to review and update this policy periodically. References to CPT® codes or other sources are for definitional purposes only and do not imply any right to reimbursement or guarantee of claims payment. No part of this publication may be reproduced, stored in a retrieval system or transmitted, in any shape or form or by any means, electronic, mechanical, photocopying or otherwise, without permission from iCare.

Related Medicare Advantage Medical/Pharmacy Coverage Policies

None

Related Documents

Please refer to [CMS website](#) for the most current applicable CMS Online Manual System (IOMs)/National Coverage Determination (NCD)/ Local Coverage Determination (LCD)/Local Coverage Article (LCA)/ Transmittals.

Type	Title	ID Number	Jurisdiction Medicare Administrative Contractors (MACs)	Applicable States/Territories
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NCD	Ultrasound Diagnostic Procedures	220.5		
LCD LCA	Transthoracic Echocardiography (TTE) Transesophageal Echocardiography (TEE)	L33577 A56781 L33579 A52868	J6, JK - National Government Services, Inc. (Part A/B MAC)	CT, IL, MA, ME, MN, NH, NY, VT, WI
LCD LCA	Transesophageal Echocardiography (TEE)	L35016 A56505	JH, JL - Novitas Solutions, Inc. (Part A/B MAC)	AR, CO, DC, DE, LA, MD, MS, NJ, NM, OK, PA, TX
LCD LCA	Transthoracic Echocardiography (TTE) Transesophageal Echocardiography (TEE)	L34338 A57306 L34337 A56809	J15 - CGS Administrators, LLC (Part A/B MAC)	KY, OH
LCD LCA	Echocardiography Echocardiography for Myocardial Perfusion	L37379 A56625 L38786 A58503	JJ, JM - Palmetto GBA (Part A/B MAC)	AL, GA, NC, SC, TN, VA, WV
LCD LCA	Transesophageal Echocardiogram	L33756 A57179	JN - First Coast Service Options, Inc. (Part A/B MAC)	FL, PR, U.S. VI

Description

Transesophageal echocardiography (TEE) is an ultrasound method that uses a transducer inserted into the esophagus to allow different views of the heart than transthoracic echocardiography (TTE). TEE provides a close and detailed visualization of the heart and its surroundings and provides clearer images than standard echocardiography due to the proximity of the esophagus to the heart. This enables a more precise assessment of cardiac function, valves and other cardiac structures. TEE is particularly useful for posterior structures, such as the pulmonary veins, left atrium, and mitral valve and provides better visualization of the aortic root, valve and the ascending and descending aorta and arch.

TEE is often conducted when TTE is not sufficiently technically effective. TEE is the preferred choice over TTE for a variety of indications and is appropriate when there is a reasonable expectation that the procedure can offer information unavailable through TTE or other less invasive imaging methods, significantly aiding in treatment decisions.

Transthoracic echocardiography (TTE) is a noninvasive procedure that utilizes ultrasound to produce detailed images of the heart's structure and function. It involves sending sound waves through the chest wall to assess the heart, detect any issues and evaluate blood flow within the organ.

Doppler flow evaluation in TTE utilizes Doppler ultrasound to assess blood circulation within the heart and blood vessels. This involves analyzing the frequency shift of reflected soundwaves from mobile structures such as heart valves and red blood cells), providing details about the direction, velocity and characteristics of blood flow. This analysis aids in evaluating heart valve function, identifying irregularities and assessing overall cardiovascular performance during TTE. This procedure is valuable for pinpointing valvular stenosis or regurgitation, estimating cardiac output and intracardiac pressures or identifying the presence of intracardiac shunts.

To qualify as a valid echocardiographic service, both TTE and TEE must be conducted by a qualified health care professional for an approved clinical indication. It should include a permanent record of the findings, sufficient data to support conclusions and an appropriate interpretation along with a written report. These standards hold regardless of the size or portability of the instrument used to perform the study.

Coverage Determination

iCare follows the CMS requirements that only allows coverage and payment for services that are reasonable and necessary for the diagnosis and treatment of illness or injury or to improve the functioning of a malformed body member except as specifically allowed by Medicare.

Please refer to the above CMS guidance for **transthoracic echocardiography (TTE) and transesophageal echocardiography (TEE)**.

In interpreting or supplementing the criteria above and in order to determine medical necessity consistently, iCare may consider [InterQual Guidelines](#).

The use of the criteria in this Medicare Advantage Medical Coverage Policy provides clinical benefits highly likely to outweigh any clinical harms. Services that do not meet the criteria above are not medically necessary and thus do not provide a clinical benefit. Medically unnecessary services carry risks of adverse outcomes and may interfere with the pursuit of other treatments which have demonstrated efficacy.

Coverage Limitations

[US Government Publishing Office. Electronic code of federal regulations: part 411 – 42 CFR § 411.15 - Particular services excluded from coverage](#)

Coding Information

Any codes listed on this policy are for informational purposes only. Do not rely on the accuracy and inclusion of specific codes. Inclusion of a code does not guarantee coverage and/or reimbursement for a service or procedure.

CPT® Code(s)	Description	Comments
93303	Transthoracic echocardiography for congenital cardiac anomalies; complete	
93304	Transthoracic echocardiography for congenital cardiac anomalies; follow-up or limited study	
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	
93312	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	
93313	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); placement of transesophageal probe only	
93314	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); image acquisition, interpretation and report only	
93315	Transesophageal echocardiography for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report	
93316	Transesophageal echocardiography for congenital cardiac anomalies; placement of transesophageal probe only	
93317	Transesophageal echocardiography for congenital cardiac anomalies; image acquisition, interpretation and report only	

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93318	Echocardiography, transesophageal (TEE) for monitoring purposes, including probe placement, real time 2-dimensional image acquisition and interpretation leading to ongoing (continuous) assessment of (dynamically changing) cardiac pumping function and to therapeutic measures on an immediate time basis	
CPT® Category III Code(s)	Description	Comments
No code(s) identified		
HCPCS Code(s)	Description	Comments
C8921	Transthoracic echocardiography (TTE) with contrast, or without contrast followed by with contrast, for congenital cardiac anomalies; complete	
C8922	Transthoracic echocardiography (TTE) with contrast, or without contrast followed by with contrast, for congenital cardiac anomalies; follow-up or limited study	
C8923	Transthoracic echocardiography (TTE) with contrast, or without contrast followed by with contrast, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color doppler echocardiography	
C8924	Transthoracic echocardiography (TTE) with contrast, or without contrast followed by with contrast, real-time with image documentation (2D), includes M-mode recording when performed, follow-up or limited study	
C8925	Transesophageal echocardiography (TEE) with contrast, or without contrast followed by with contrast, real time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	
C8926	Transesophageal echocardiography (TEE) with contrast, or without contrast followed by with contrast, for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report	
C8927	Transesophageal echocardiography (TEE) with contrast, or without contrast followed by with contrast, for monitoring purposes, including probe placement, real time (2D) image acquisition and interpretation leading to ongoing (continuous) assessment of (dynamically changing) cardiac pumping function and to therapeutic measures on an immediate time basis	

C8928	Transthoracic echocardiography (TTE) with contrast, or without contrast followed by with contrast, 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	
C8929	Transthoracic echocardiography (TTE) with contrast, or without contrast followed by with contrast, real-time with image documentation (2D), includes M-mode recording, when performed, complete, with spectral doppler echocardiography, and with color flow doppler echocardiography	
C8930	Transthoracic echocardiography (TTE) with contrast, or without contrast followed by with contrast, 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 physician supervision	

References

- Centers for Medicare & Medicaid Services (CMS). Local Coverage Determination (LCD). Echocardiography (L37379). <https://www.cms.gov>. Published September 18, 2017. Updated June 10, 2023. Accessed November 14, 2023.
- Centers for Medicare & Medicaid Services (CMS). Local Coverage Determination (LCD). Echocardiography for myocardial perfusion (L38786). <https://www.cms.gov>. Published February 7, 2021. Accessed November 14, 2023.
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Change Summary

- 01/01/2024 New Policy.