

**CARDIAC REHAB PROGRAMS – CHRONIC HEART FAILURE
CMS UPDATES - TABLE**

The purpose of this table is to provide updated information on the 2014 CMS decision to expand cardiac rehabilitation coverage to Chronic Heart Failure

	CARDIAC REHABILITATION*	INTENSIVE CARDIAC REHABILITATION*
Definition	<p>Physician prescribed, physician supervised exercise program with:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cardiac risk factor modification including education, counseling and behavioral intervention and <input type="checkbox"/> Psychosocial assessment and <input type="checkbox"/> Outcomes assessment 	<p>Physician prescribed, physician supervised exercise program with:</p> <ul style="list-style-type: none"> <input type="checkbox"/> <i>More rigorous and frequent sessions</i> <input type="checkbox"/> Cardiac risk factor modification including education, counseling and behavioral intervention at least once during the program, <i>tailored to patients' individual needs;</i> <input type="checkbox"/> Psychosocial assessment <input type="checkbox"/> Outcomes assessment and <input type="checkbox"/> <i>An individualized treatment plan detailing how components are utilized for each patient</i>
Indications	<ul style="list-style-type: none"> <input type="checkbox"/> Acute myocardial infarction within the preceding 12 months; <input type="checkbox"/> Coronary artery bypass surgery; <input type="checkbox"/> Current stable angina pectoris; <input type="checkbox"/> Heart valve repair or replacement; <input type="checkbox"/> Percutaneous transluminal coronary angioplasty (PTCA) or coronary stent; and <input type="checkbox"/> Heart or heart-lung transplant <input type="checkbox"/> Stable, chronic heart failure defined as patients with left ventricular ejection fraction of 35% or less and New York Heart Association (NYHS) class II to IV symptoms despite being on optimal heart failure therapy for at least 6 weeks. 	<ul style="list-style-type: none"> <input type="checkbox"/> Acute myocardial infarction within the preceding 12 months; <input type="checkbox"/> Coronary artery bypass surgery; <input type="checkbox"/> Current stable angina pectoris; <input type="checkbox"/> Heart valve repair or replacement; <input type="checkbox"/> Percutaneous transluminal coronary angioplasty (PTCA) or coronary stent; and <input type="checkbox"/> Heart or heart-lung transplant <input type="checkbox"/> Stable, chronic heart failure defined as patients with left ventricular ejection fraction of 35% or less and New York Heart Association (NYHS) class II to IV symptoms despite being on optimal heart failure therapy for at least 6 weeks.

**CARDIAC REHAB PROGRAMS – CHRONIC HEART FAILURE
CMS UPDATES - TABLE**

<p align="center">Program Requirements</p>	<p>Programs must take place in:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Outpatient hospitals, or <input type="checkbox"/> Outpatient settings such as clinics, offices, or cardiac rehab centers. 	<p>Programs must take place in:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A physician’s office or <input type="checkbox"/> Hospital outpatient setting where a physician is immediately available and accessible for any medical consultations and <p><i>Individual programs must be approved through the national coverage determination process.</i></p> <p>Through peer-reviewed published research, programs must show that they:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Positively affect the progression of coronary heart disease <input type="checkbox"/> Reduce the need for coronary bypass surgery; and <input type="checkbox"/> Reduce the need for percutaneous coronary interventions <input type="checkbox"/> Statistically significant reduction in five or more of the following measures: <ul style="list-style-type: none"> o Low density lipoprotein o Triglycerides o Body Mass Index o Systolic Blood Pressure o Diastolic Blood Pressure o The need for cholesterol, blood pressure and diabetes medications
<p align="center">Facility Requirements</p>	<p>All facilities must have:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cardio-pulmonary, emergency, diagnostic and therapeutic life-saving equipment that is accepted by the medical community as medically necessary, e.g., oxygen, cardiopulmonary resuscitation equipment or defibrillator. <input type="checkbox"/> Facility staff must be trained in both basic and advanced life support techniques and in exercise therapy for coronary disease. 	<p>All facilities must have:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cardio-pulmonary, emergency, diagnostic and therapeutic life-saving equipment that is accepted by the medical community as medically necessary, e.g., oxygen, cardiopulmonary resuscitation equipment or defibrillator. <input type="checkbox"/> Facility staff must be trained in both basic and advanced life support techniques and in exercise therapy for coronary disease.

**CARDIAC REHAB PROGRAMS – CHRONIC HEART FAILURE
CMS UPDATES - TABLE**

<p>Sessions Covered</p>	<ul style="list-style-type: none"> <input type="checkbox"/> CMS will cover up to 36 sessions with patients generally receiving 2-3 sessions per week for 12 – 18 weeks. <input type="checkbox"/> Discretion is given to the contractor of these services for additional sessions beyond 18 weeks however coverage cannot exceed a total of 72 sessions for 36 weeks. <input type="checkbox"/> Practitioners may report a maximum of 2, one-hour sessions per day with the duration of treatment lasting at least 31 minutes per session. <input type="checkbox"/> If the duration of treatment is at least 91 minutes then two sessions may be reported. <input type="checkbox"/> If there are multiple shorter sessions on one day, they must be added to report in one-hour increments. 	<ul style="list-style-type: none"> <input type="checkbox"/> Practitioners may report a maximum of 6, one-hour sessions per day with a session lasting at least 31 minutes. <input type="checkbox"/> Additional sessions may be reported in the same day if the treatment duration is at least 31 minutes. <input type="checkbox"/> If there are multiple shorter sessions on one day, they must be added to report in one-hour increments.
<p>Examples</p>	<ul style="list-style-type: none"> <input type="checkbox"/> If a 20 minute cardiac rehabilitation session is provided, it may not be reported as it is less than 31 minutes. <input type="checkbox"/> If a 20 minute morning session and a 35 minute afternoon session are provided for the same patient, it would be reported as one session given that it lasted 55 minutes. <input type="checkbox"/> If a 70 minute morning session and 25 minute afternoon session are provided for the same patient, this would amount to two sessions as the duration was greater than 90 minutes <input type="checkbox"/> If a 70 minute morning session and an 80 minute afternoon session are provided for the same patient, this would still be two sessions because only a maximum of two sessions can be reported per day. 	<ul style="list-style-type: none"> <input type="checkbox"/> If a 20 minute intensive cardiac rehabilitation session is provided, it may not be reported as it is less than 31 minutes. <input type="checkbox"/> If a 20 minute intensive morning session and a 35 minute intensive afternoon session are provided for the same patient, it would be reported as one session given that it lasted 55 minutes. <input type="checkbox"/> If a 70 minute intensive morning session and 25 minute intensive afternoon session are provided for the same patient, this would amount to two sessions as the duration was greater than 90 minutes. <input type="checkbox"/> If a 70 minute intensive morning session and an 80 minute intensive afternoon session are provided for the same patient, this would still be two sessions because only a maximum of two sessions can be reported per day.
<p>HCPCS Codes</p>	<ul style="list-style-type: none"> <input type="checkbox"/> 3797 – Physician services for outpatient cardiac rehabilitation; without continuous ECG monitoring (per session) <input type="checkbox"/> 93798 – Physician services for outpatient cardiac rehabilitation; without continuous ECG monitoring (per session) 	<ul style="list-style-type: none"> <input type="checkbox"/> G0422 (Intensive cardiac rehabilitation; with or without continuous ECG monitoring, with exercise, per hour, per <ul style="list-style-type: none"> o session) <input type="checkbox"/> G0423 (Intensive cardiac rehabilitation; with or without continuous ECG monitoring, without exercise, per hour, per <ul style="list-style-type: none"> o session)

*Information for this table was taken from the following sources:
 CMS Decision Memo for Cardiac Rehabilitation (CR) Programs – Chronic Heart Failure (CAG-00437N)
 Medicare Claims Processing Manual: Chapter 32 – Billing Requirements for Special Services
 National Coverage Determination (NCD) for Cardiac Rehabilitation Programs (20.10)
 National Coverage Determination (NCD) for Intensive Cardiac Rehabilitation (ICR) Programs (20.31)