

Reimbursement Policy Statement Illinois Medicaid

Effective Date		Next Annual Review		Policy Number	
12/01/2020		07/01/2027		ABHIL-RP-0019	
Policy Name			Department		
Holter Monitors			Claims Operations Medical Payment		
Policy Type					
Medical		Administrative		Pharmacy	
				Reimbursement	

Aetna Better Health® of Illinois (ABH IL) implements comprehensive and robust policies and procedures to ensure alignment with Illinois Department of Health Care and Family Services (HFS) and to warrant that regulatory standards are met.

ABH IL reimbursement policies are intended to provide a general reference for claims filing, coding, documentation guidelines and administrative functions. Providers are ultimately responsible for submission of accurate reporting of services provided.

Reimbursement of reported services is subject to member benefit, eligibility on date of service, medical necessity, related plan policies and procedures, correct coding and clinical editing logic, provider contracts and all applicable plan documentation and guidelines set forth by Illinois Department of Health Care and Family Services (HFS). Coding methodology, regulatory requirements, industry standard claims logic, guidance from specialty organizations and other factors are considered in the development of plan policies. ABH IL retains the right to change, amend or withdraw this policy as needed, at any time.

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A. Policy

This policy is provided as a guide to medical coding and editing guidelines for the appropriate reporting of Holter monitoring. This guidance aligns with AMA CPT Coding Guidelines, ICD-10-CM Coding Guidelines and Aetna Clinical Policy for Holter monitors.

B. Overview

This policy outlines the coding and editing guidelines for Holter monitoring. A Holter monitor is a small, portable device that records the heart's electrical activity (heartbeat) continuously for 24–48 hours or sometimes longer. Holter monitoring is conducted to check for irregular heart rhythms, evaluate symptoms like dizziness, fainting or palpitations or to monitor the effectiveness of certain treatments. This policy applies to all professional and facility claim types.

C. Definitions

Term	Definition
Aetna Better Health of Illinois (ABHIL)	A subsidiary of CVS Health Corporation, Medicaid subsidiary that provides plan management and other administrative services for the Illinois Medicaid program.
American Medical Association (AMA)	A professional group that publishes research to advance public health and advocates for the interests of registered physician-members.
Centers for Medicare & Medicaid Services (CMS)	The federal agency that administers the Medicare program as well as works with the individual states to administer state Medicaid and Children's Health Insurance Programs.
Current Procedural Terminology (CPT)	A medical code set maintained by the American Medical Association through the CPT Editorial Panel. The CPT code set (copyright protected by the AMA) describes medical, surgical, and diagnostic services and is designed to communicate uniform information about medical services and procedures among physicians, coders, patients, accreditation organizations, and payers for administrative, financial, and analytical purposes.
Illinois Department of Health Care and Family Services (HFS)	The Department of Healthcare and Family Services administers health insurance programs for children, pregnant women, and adults who are residents of Illinois.
International Statistical Classification of Diseases (ICD-10-CM)	The 10th revision of the (ICD), a medical classification list by the World Health Organization (WHO). It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases.

Medicaid	The state administered program that provides health coverage to millions of Americans, including eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities, according to federal requirements. The program is funded jointly by states and the federal government.
Medicare	Medicare is a health insurance program for: people aged sixty-five (65) or older, people under age sixty-five (65) with certain disabilities, and people of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).

D. Reimbursement Guidelines

ABH IL will only reimburse for the appropriate reporting of Holter monitoring when

- Services are reported with an ICD-10-CM diagnosis code that indicates a cardiac symptom or event as listed in this policy.

Claims that are submitted will be denied when

- services are reported without an ICD-10-CM diagnosis code that does not indicate a cardiac symptom or event.

The medical record documentation is expected to support the specific CPT code(s) and ICD-10-CM codes reported.

E. Codes/Condition of Coverage

CPT Codes

93224	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation by a physician or other qualified health care professional
93225	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; recording (includes connection, recording, and disconnection)
93226	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; scanning analysis with report
93227	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; review and interpretation by a physician or other qualified health care professional

Supported ICD-10-CM Codes

E10.40- E10.49	Type 1 diabetes mellitus with neurological complications
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E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy
E11.40- E11.49	Type 2 diabetes mellitus with neurological complications
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy
F45.8	Other somatoform disorders
G45.0	Vertebro-basilar artery syndrome
G45.1	Carotid artery syndrome (hemispheric)
G45.8	Other transient cerebral ischemic attacks and related syndromes Update 06/2026
G45.9	Transient cerebral ischemic attack, unspecified
G99.0	Autonomic neuropathy in diseases classified elsewhere
I20.0	Unstable angina
I20.1	Angina pectoris with documented spasm
I21.01- I21.A9	Acute myocardial infarction
I22.0- I22.9	Subsequent ST elevation (STEMI) and non-ST elevation (NSTEMI) myocardial infarction
I24.0- I24.9	Other acute ischemic heart diseases
I25.2	Old myocardial infarction
I42.0	Dilated cardiomyopathy
I42.1	Obstructive hypertrophic cardiomyopathy
I42.2	Other hypertrophic cardiomyopathy
I44.0- I44.7	Atrioventricular and left bundle-branch block
I45.0- I45.9	Other conduction disorders
I46.2- I46.9	Cardiac arrest
I47.0- I47.9	Paroxysmal tachycardia
I48.0- I48.92	Atrial fibrillation and flutter
I49.01- I49.9	Other cardiac arrhythmias
I63.00- I63.9	Cerebral infarction

I67.841- I67.848	Cerebral vasospasm and vasoconstriction
Q24.6	Congenital heart block
R00.0	Tachycardia, unspecified
R00.1	Bradycardia, unspecified
R00.2	Palpitations
R42	Dizziness and giddiness
R55	Syncope and collapse
Z95.0	Presence of cardiac pacemaker
Z95.810	Presence of automatic (implantable) cardiac defibrillator

F. Frequently Asked Questions

N/A

G. Review/Revision Date

Action	Date	Comments
Annual Review	06/02/2026	Reviewed; addition of diagnosis code G45.8; no other content changes
Revision	02/02/2026	Policy template updated, diagnosis codes reviewed; no other content changes
Review	08/22/2025	Review- No content changes
Effective Date	12/01/2020	

H. Resources

1. Aetna. (2026, March 13). *Holter monitors (Clinical Policy Bulletin No. 0019)*.
https://www.aetna.com/cpb/medical/data/1_99/0019.html
2. American Medical Association. *CPT Professional Edition 2026*, AMA; 2025.
3. American Medical Association. *ICD-10-CM 2026 the Complete Official Codebook*, AMA; 2025.