March 12, 2021

Andrew Bloschichak, MD, MBA

Executive Contractor Medical Director

Novitas Solutions, Inc.

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RE: Novitas Solutions (Novitas) Reimbursement Rate for New External ECG Recording Codes

Dear Dr. Bloschichak:

I would like to ask for your assistance. I am writing to strongly disagree with the January 29, 2021 Novitas decision to drastically cut reimbursement for the CPT Codes (93241, 93243, 93245, 93247) for long-term continuous event monitors. I feel it is important to understand what, if any, clinical evidence was used to support this decision.

These reimbursement rates no longer even cover the cost to purchase these products. This prevents our practice from providing access and optimal care to patients. In addition, it seems the rates have been copied from the Holter rates, although the category provides more functionality and requires additional physician time. Clinical evidence demonstrates long-term continuous ECG wearable technology enables better detection and diagnosis of cardiac-related conditions including arrhythmias and aids in stroke prevention. These long-term continuous monitors are needed for many patients who do not benefit from shorter duration Holter recorders.

Below are some of the benefits of long-term continuous ECG monitors particularly when compared to traditional Holters (24-48 hours)[[1]](#footnote-1):

* Higher rate of patient compliance and satisfaction and a significant improvement in arrhythmia detection with >48 hours period.
* More opportunity to capture cardiac arrhythmias and symptoms not recorded in a standard 24–48-hour Holter Monitor. Standard Holter recordings can have a low overall diagnostic yield with low sensitivity and negative predictive value for the detection of atrial fibrillation, one of the most common rhythms diagnosed today.
* Increased diagnostic yield by 25% or more from longer continuous wear time. 97.5% of all arrythmias are captured by day 8.
* Studies have found extended patch monitoring >48 hours result in a change in patient management in approximately one-third of patients.

We believe the extremely low reimbursement will severely impede effective patient atrial fibrillation detection and negatively affect patient care. We ask for your reconsideration as well as request a timely written response to this letter.

Thank you for your time and consideration.

Sincerely,

Name, Practice Name, Phone, NPI #

1. Hauser, Robert G., MD, FACC, FHRS. *Cost-Effective Ambulatory ECG Monitoring.* EP Lab Digest. May 2020. [↑](#footnote-ref-1)