

Chapter 7

Section 11.1

Cardiac Rehabilitation

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1.0 CPT PROCEDURE CODE RANGE

93797 - 93798

2.0 DESCRIPTION

Cardiac rehabilitation is the process by which individuals are restored to their optimal physical, medical, and psychological status, after a cardiac event. Cardiac rehabilitation is often divided into three phases. Phase I begins during inpatient hospitalization and is managed by the patient's personal physician. Phase II is a medically supervised outpatient program which begins following discharge. Phase III is a lifetime maintenance program emphasizing continuation of physical fitness with periodic follow-up. Each phase includes an exercise component, patient education, and risk factor modification. There may be considerable variation in program components, intensity and duration.

3.0 POLICY

3.1 Cardiac rehabilitation services are cost-shared on an inpatient or outpatient basis for services and supplies provided in connection with a cardiac rehabilitation program when ordered by a physician and provided as treatment for patients who have experienced the following cardiac events within the preceding 12 months:

- Myocardial infarction.
- Coronary artery bypass graft.
- Coronary angioplasty.
- Percutaneous transluminal coronary angioplasty.
- Chronic stable angina.
- Heart valve surgery.
- Heart transplants, to include heart-lung.
- **Congestive Heart Failure (CHF)/Stable Chronic Heart Failure (SCHF).**

3.2 Payable benefits include separate allowance for the initial evaluation and testing. Outpatient treatment following the initial intake evaluation and testing is limited to a maximum of 36 sessions per cardiac event, usually provided three sessions per week for 12 weeks. Patient's diagnosed with chronic stable angina **and CHF/SCHF** are limited to one treatment episode (36 sessions) in a calendar year.

4.0 EXCLUSION

Phase III cardiac rehabilitation for lifetime maintenance performed at home or in medically unsupervised settings.

5.0 EFFECTIVE DATES

5.1 Effective October 9, 1987, for myocardial infarction, coronary artery bypass graft, coronary angioplasty, percutaneous transluminal coronary angioplasty, and chronic stable angina.

5.2 Effective December 1, 1991, for heart valve surgery and heart transplants, to include heart-lung.

5.3 Effective July 18, 2016, for CHF/SCHF.

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