

Article - Billing and Coding: MolDX: Biomarkers in Cardiovascular Risk Assessment (A57055)

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Contractor Information

| CONTRACTOR NAME | CONTRACT TYPE | CONTRACT NUMBER | JURISDICTION | STATES |
|--|---------------|-----------------|--------------|--------------|
| Noridian Healthcare Solutions, LLC | A and B MAC | 02101 - MAC A | J - F | Alaska |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02102 - MAC B | J - F | Alaska |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02201 - MAC A | J - F | Idaho |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02202 - MAC B | J - F | Idaho |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02301 - MAC A | J - F | Oregon |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02302 - MAC B | J - F | Oregon |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02401 - MAC A | J - F | Washington |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02402 - MAC B | J - F | Washington |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03101 - MAC A | J - F | Arizona |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03102 - MAC B | J - F | Arizona |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03201 - MAC A | J - F | Montana |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03202 - MAC B | J - F | Montana |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03301 - MAC A | J - F | North Dakota |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03302 - MAC B | J - F | North Dakota |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03401 - MAC A | J - F | South Dakota |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03402 - MAC B | J - F | South Dakota |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03501 - MAC A | J - F | Utah |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03502 - MAC B | J - F | Utah |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03601 - MAC A | J - F | Wyoming |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03602 - MAC B | J - F | Wyoming |

Article Information

General Information

Article ID
A57055

Article Title

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Billing and Coding: MolDX: Biomarkers in Cardiovascular Risk Assessment

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Article Type

Billing and Coding

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N/A

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Retirement Date

N/A

CMS National Coverage Policy

Title XVIII of the Social Security Act, §1833(e), prohibits Medicare payment for any claim lacking the necessary documentation to process the claim

CMS Internet-Only Manuals, Publication 100-04, Medicare Claims Processing Manual, Chapter 16, §50.5 Jurisdiction of Laboratory Claims, 60.1.2 Independent Laboratory Specimen Drawing, 60.2. Travel Allowance

CMS Internet Online Manual Pub. 100-04, (Medicare Claims Processing Manual), Chapter 23 §10 Reporting ICD Diagnosis and Procedure Codes

Article Guidance

Article Text

The information in this article contains billing, coding or other guidelines that complement the Local Coverage Determination (LCD) for MolDX: Biomarkers in Cardiovascular Risk Assessment L36362.

Coding Information

CPT/HCPCS Codes

Group 1 Paragraph:

The following CPT codes are covered:

Group 1 Codes: (11 Codes)

| CODE | DESCRIPTION |
|-------|---|
| 82172 | APOLIPOPROTEIN, EACH |
| 82610 | CYSTATIN C |
| 83090 | HOMOCYSTEINE |
| 83695 | LIPOPROTEIN (A) |
| 83698 | LIPOPROTEIN-ASSOCIATED PHOSPHOLIPASE A2 (LP-PLA2) |
| 83700 | LIPOPROTEIN, BLOOD; ELECTROPHORETIC SEPARATION AND QUANTITATION |
| 83701 | LIPOPROTEIN, BLOOD; HIGH RESOLUTION FRACTIONATION AND QUANTITATION OF LIPOPROTEINS INCLUDING LIPOPROTEIN SUBCLASSES WHEN PERFORMED (EG, ELECTROPHORESIS, ULTRACENTRIFUGATION) |
| 83704 | LIPOPROTEIN, BLOOD; QUANTITATION OF LIPOPROTEIN PARTICLE NUMBER(S) (EG, BY NUCLEAR MAGNETIC RESONANCE SPECTROSCOPY), INCLUDES LIPOPROTEIN PARTICLE SUBCLASS(ES), WHEN PERFORMED |
| 83719 | LIPOPROTEIN, DIRECT MEASUREMENT; VLDL CHOLESTEROL |
| 83721 | LIPOPROTEIN, DIRECT MEASUREMENT; LDL CHOLESTEROL |
| 86141 | C-REACTIVE PROTEIN; HIGH SENSITIVITY (HSCRIP) |

CPT/HCPCS Modifiers**Group 1 Paragraph:**

N/A

Group 1 Codes:

N/A

ICD-10-CM Codes that Support Medical Necessity**Group 1 Paragraph:**

The following ICD-10 codes are covered:

Group 1 Codes: (177 Codes)

| CODE | DESCRIPTION |
|--------|--|
| E71.30 | Disorder of fatty-acid metabolism, unspecified |

| CODE | DESCRIPTION |
|---------|---|
| E75.21 | Fabry (-Anderson) disease |
| E75.22 | Gaucher disease |
| E75.240 | Niemann-Pick disease type A |
| E75.241 | Niemann-Pick disease type B |
| E75.242 | Niemann-Pick disease type C |
| E75.243 | Niemann-Pick disease type D |
| E75.244 | Niemann-Pick disease type A/B |
| E75.248 | Other Niemann-Pick disease |
| E75.249 | Niemann-Pick disease, unspecified |
| E75.3 | Sphingolipidosis, unspecified |
| E75.5 | Other lipid storage disorders |
| E75.6 | Lipid storage disorder, unspecified |
| E77.0 | Defects in post-translational modification of lysosomal enzymes |
| E77.8 | Other disorders of glycoprotein metabolism |
| E77.9 | Disorder of glycoprotein metabolism, unspecified |
| E78.00 | Pure hypercholesterolemia, unspecified |
| E78.01 | Familial hypercholesterolemia |
| E78.1 | Pure hyperglyceridemia |
| E78.2 | Mixed hyperlipidemia |
| E78.3 | Hyperchylomicronemia |
| E78.41 | Elevated Lipoprotein(a) |
| E78.49 | Other hyperlipidemia |
| E78.5 | Hyperlipidemia, unspecified |
| E78.70 | Disorder of bile acid and cholesterol metabolism, unspecified |
| E78.79 | Other disorders of bile acid and cholesterol metabolism |
| E78.81 | Lipoid dermatoarthritis |
| E78.89 | Other lipoprotein metabolism disorders |
| E78.9 | Disorder of lipoprotein metabolism, unspecified |
| E88.1 | Lipodystrophy, not elsewhere classified |
| E88.2 | Lipomatosis, not elsewhere classified |
| E88.89 | Other specified metabolic disorders |
| I10 | Essential (primary) hypertension |

| CODE | DESCRIPTION |
|---------|--|
| I25.10 | Atherosclerotic heart disease of native coronary artery without angina pectoris |
| I42.0 | Dilated cardiomyopathy |
| I48.11 | Longstanding persistent atrial fibrillation |
| I48.19 | Other persistent atrial fibrillation |
| I48.20 | Chronic atrial fibrillation, unspecified |
| I48.21 | Permanent atrial fibrillation |
| I51.9 | Heart disease, unspecified |
| I52 | Other heart disorders in diseases classified elsewhere |
| I63.011 | Cerebral infarction due to thrombosis of right vertebral artery |
| I63.012 | Cerebral infarction due to thrombosis of left vertebral artery |
| I63.013 | Cerebral infarction due to thrombosis of bilateral vertebral arteries |
| I63.02 | Cerebral infarction due to thrombosis of basilar artery |
| I63.031 | Cerebral infarction due to thrombosis of right carotid artery |
| I63.032 | Cerebral infarction due to thrombosis of left carotid artery |
| I63.033 | Cerebral infarction due to thrombosis of bilateral carotid arteries |
| I63.09 | Cerebral infarction due to thrombosis of other precerebral artery |
| I63.111 | Cerebral infarction due to embolism of right vertebral artery |
| I63.112 | Cerebral infarction due to embolism of left vertebral artery |
| I63.113 | Cerebral infarction due to embolism of bilateral vertebral arteries |
| I63.12 | Cerebral infarction due to embolism of basilar artery |
| I63.131 | Cerebral infarction due to embolism of right carotid artery |
| I63.132 | Cerebral infarction due to embolism of left carotid artery |
| I63.133 | Cerebral infarction due to embolism of bilateral carotid arteries |
| I63.19 | Cerebral infarction due to embolism of other precerebral artery |
| I63.211 | Cerebral infarction due to unspecified occlusion or stenosis of right vertebral artery |
| I63.212 | Cerebral infarction due to unspecified occlusion or stenosis of left vertebral artery |
| I63.213 | Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries |
| I63.22 | Cerebral infarction due to unspecified occlusion or stenosis of basilar artery |
| I63.231 | Cerebral infarction due to unspecified occlusion or stenosis of right carotid arteries |
| I63.232 | Cerebral infarction due to unspecified occlusion or stenosis of left carotid arteries |
| I63.233 | Cerebral infarction due to unspecified occlusion or stenosis of bilateral carotid |

| CODE | DESCRIPTION |
|---------|--|
| | arteries |
| I63.29 | Cerebral infarction due to unspecified occlusion or stenosis of other precerebral arteries |
| I63.311 | Cerebral infarction due to thrombosis of right middle cerebral artery |
| I63.312 | Cerebral infarction due to thrombosis of left middle cerebral artery |
| I63.313 | Cerebral infarction due to thrombosis of bilateral middle cerebral arteries |
| I63.321 | Cerebral infarction due to thrombosis of right anterior cerebral artery |
| I63.322 | Cerebral infarction due to thrombosis of left anterior cerebral artery |
| I63.323 | Cerebral infarction due to thrombosis of bilateral anterior cerebral arteries |
| I63.331 | Cerebral infarction due to thrombosis of right posterior cerebral artery |
| I63.332 | Cerebral infarction due to thrombosis of left posterior cerebral artery |
| I63.333 | Cerebral infarction due to thrombosis of bilateral posterior cerebral arteries |
| I63.341 | Cerebral infarction due to thrombosis of right cerebellar artery |
| I63.342 | Cerebral infarction due to thrombosis of left cerebellar artery |
| I63.343 | Cerebral infarction due to thrombosis of bilateral cerebellar arteries |
| I63.39 | Cerebral infarction due to thrombosis of other cerebral artery |
| I63.411 | Cerebral infarction due to embolism of right middle cerebral artery |
| I63.412 | Cerebral infarction due to embolism of left middle cerebral artery |
| I63.413 | Cerebral infarction due to embolism of bilateral middle cerebral arteries |
| I63.421 | Cerebral infarction due to embolism of right anterior cerebral artery |
| I63.422 | Cerebral infarction due to embolism of left anterior cerebral artery |
| I63.423 | Cerebral infarction due to embolism of bilateral anterior cerebral arteries |
| I63.431 | Cerebral infarction due to embolism of right posterior cerebral artery |
| I63.432 | Cerebral infarction due to embolism of left posterior cerebral artery |
| I63.433 | Cerebral infarction due to embolism of bilateral posterior cerebral arteries |
| I63.441 | Cerebral infarction due to embolism of right cerebellar artery |
| I63.442 | Cerebral infarction due to embolism of left cerebellar artery |
| I63.443 | Cerebral infarction due to embolism of bilateral cerebellar arteries |
| I63.49 | Cerebral infarction due to embolism of other cerebral artery |
| I63.511 | Cerebral infarction due to unspecified occlusion or stenosis of right middle cerebral artery |
| I63.512 | Cerebral infarction due to unspecified occlusion or stenosis of left middle cerebral artery |

| CODE | DESCRIPTION |
|-------------|---|
| I63.513 | Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle cerebral arteries |
| I63.521 | Cerebral infarction due to unspecified occlusion or stenosis of right anterior cerebral artery |
| I63.522 | Cerebral infarction due to unspecified occlusion or stenosis of left anterior cerebral artery |
| I63.523 | Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior cerebral arteries |
| I63.531 | Cerebral infarction due to unspecified occlusion or stenosis of right posterior cerebral artery |
| I63.532 | Cerebral infarction due to unspecified occlusion or stenosis of left posterior cerebral artery |
| I63.533 | Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior cerebral arteries |
| I63.541 | Cerebral infarction due to unspecified occlusion or stenosis of right cerebellar artery |
| CODE | DESCRIPTION |
| I63.542 | Cerebral infarction due to unspecified occlusion or stenosis of left cerebellar artery |
| I63.543 | Cerebral infarction due to unspecified occlusion or stenosis of bilateral cerebellar arteries |
| I63.59 | Cerebral infarction due to unspecified occlusion or stenosis of other cerebral artery |
| I63.81 | Other cerebral infarction due to occlusion or stenosis of small artery |
| I63.89 | Other cerebral infarction |
| I63.9 | Cerebral infarction, unspecified |
| I67.858 | Other hereditary cerebrovascular disease |
| I70.0 | Atherosclerosis of aorta |
| I70.1 | Atherosclerosis of renal artery |
| I70.201 | Unspecified atherosclerosis of native arteries of extremities, right leg |
| I70.202 | Unspecified atherosclerosis of native arteries of extremities, left leg |
| I70.203 | Unspecified atherosclerosis of native arteries of extremities, bilateral legs |
| I70.208 | Unspecified atherosclerosis of native arteries of extremities, other extremity |
| I70.211 | Atherosclerosis of native arteries of extremities with intermittent claudication, right leg |
| I70.212 | Atherosclerosis of native arteries of extremities with intermittent claudication, left leg |
| I70.213 | Atherosclerosis of native arteries of extremities with intermittent claudication, |

| CODE | DESCRIPTION |
|---------|---|
| | bilateral legs |
| I70.218 | Atherosclerosis of native arteries of extremities with intermittent claudication, other extremity |
| I70.221 | Atherosclerosis of native arteries of extremities with rest pain, right leg |
| I70.222 | Atherosclerosis of native arteries of extremities with rest pain, left leg |
| I70.223 | Atherosclerosis of native arteries of extremities with rest pain, bilateral legs |
| I70.228 | Atherosclerosis of native arteries of extremities with rest pain, other extremity |
| I70.231 | Atherosclerosis of native arteries of right leg with ulceration of thigh |
| I70.232 | Atherosclerosis of native arteries of right leg with ulceration of calf |
| I70.233 | Atherosclerosis of native arteries of right leg with ulceration of ankle |
| I70.234 | Atherosclerosis of native arteries of right leg with ulceration of heel and midfoot |
| I70.235 | Atherosclerosis of native arteries of right leg with ulceration of other part of foot |
| I70.238 | Atherosclerosis of native arteries of right leg with ulceration of other part of lower leg |
| I70.241 | Atherosclerosis of native arteries of left leg with ulceration of thigh |
| I70.242 | Atherosclerosis of native arteries of left leg with ulceration of calf |
| I70.243 | Atherosclerosis of native arteries of left leg with ulceration of ankle |
| I70.244 | Atherosclerosis of native arteries of left leg with ulceration of heel and midfoot |
| I70.245 | Atherosclerosis of native arteries of left leg with ulceration of other part of foot |
| I70.248 | Atherosclerosis of native arteries of left leg with ulceration of other part of lower leg |
| I70.25 | Atherosclerosis of native arteries of other extremities with ulceration |
| I70.261 | Atherosclerosis of native arteries of extremities with gangrene, right leg |
| I70.262 | Atherosclerosis of native arteries of extremities with gangrene, left leg |
| I70.263 | Atherosclerosis of native arteries of extremities with gangrene, bilateral legs |
| I70.268 | Atherosclerosis of native arteries of extremities with gangrene, other extremity |
| I70.291 | Other atherosclerosis of native arteries of extremities, right leg |
| I70.292 | Other atherosclerosis of native arteries of extremities, left leg |
| I70.293 | Other atherosclerosis of native arteries of extremities, bilateral legs |
| I70.298 | Other atherosclerosis of native arteries of extremities, other extremity |
| I70.301 | Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, right leg |
| I70.302 | Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, left leg |

| CODE | DESCRIPTION |
|---------|---|
| I70.303 | Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, bilateral legs |
| I70.308 | Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, other extremity |
| I70.311 | Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, right leg |
| I70.312 | Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, left leg |
| I70.313 | Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, bilateral legs |
| I70.318 | Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, other extremity |
| I70.321 | Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, right leg |
| I70.322 | Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, left leg |
| I70.323 | Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, bilateral legs |
| I70.328 | Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, other extremity |
| I70.331 | Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of thigh |
| I70.332 | Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of calf |
| I70.333 | Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of ankle |
| I70.334 | Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of heel and midfoot |
| I70.335 | Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of foot |
| I70.8 | Atherosclerosis of other arteries |
| I70.90 | Unspecified atherosclerosis |
| I70.91 | Generalized atherosclerosis |
| I70.92 | Chronic total occlusion of artery of the extremities |
| R00.2 | Palpitations |
| R07.1 | Chest pain on breathing |

| CODE | DESCRIPTION |
|---------|--|
| R07.2 | Precordial pain |
| R07.82 | Intercostal pain |
| R07.89 | Other chest pain |
| R07.9 | Chest pain, unspecified |
| Z13.6 | Encounter for screening for cardiovascular disorders |
| Z86.711 | Personal history of pulmonary embolism |
| Z86.718 | Personal history of other venous thrombosis and embolism |
| Z86.72 | Personal history of thrombophlebitis |
| Z86.73 | Personal history of transient ischemic attack (TIA), and cerebral infarction without residual deficits |
| Z86.74 | Personal history of sudden cardiac arrest |
| Z86.79 | Personal history of other diseases of the circulatory system |

ICD-10-CM Codes that DO NOT Support Medical Necessity

Group 1 Paragraph:

N/A

Group 1 Codes:

N/A

ICD-10-PCS Codes

Group 1 Paragraph:

N/A

Group 1 Codes:

N/A

Additional ICD-10 Information

N/A

Bill Type Codes

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the article does not apply to that Bill Type. Complete absence of all

Bill Types indicates that coverage is not influenced by Bill Type and the article should be assumed to apply equally to all claims.

| CODE | DESCRIPTION |
|------|----------------|
| 999x | Not Applicable |

Revenue Codes

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the article, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the article should be assumed to apply equally to all Revenue Codes.

N/A

Other Coding Information

Group 1 Paragraph:

N/A

Group 1 Codes:

N/A

Revision History Information

| REVISION HISTORY DATE | REVISION HISTORY NUMBER | REVISION HISTORY EXPLANATION |
|-----------------------|-------------------------|---|
| 01/01/2023 | R4 | Under CPT/HCPCS Codes Group 1: Codes the description was revised for 83090. This revision is due to the 2023 Annual/Q1 CPT/HCPCS Code Update and is effective for dates of service on or after 1/1/2023. |
| 10/01/2021 | R3 | Under ICD-10 Codes that Support Medical Necessity Group 1: codes added E75.249, E77.9, E78.49, I63.39. Codes added to correct typographical error. |
| 10/01/2021 | R2 | Under ICD-10 Codes that Support Medical Necessity Group 1: Codes deleted I48.91, I63.00, I63.019, I63.039, I63.10, I63.119, I63.139, I63.20, I63.219, I63.239, I63.30, I63.319, I63.329, I63.339, I63.349, I63.40, I63.419, I63.429, I63.439, I63.449, I63.50, I63.519, I63.529, I63.539, I63.549, I70.209, I70.219, I70.229, I70.239, I70.249, I70.269, I70.299, I70.309, I70.319, I70.329. This revision will become effective 10/1/21. |

| REVISION HISTORY DATE | REVISION HISTORY NUMBER | REVISION HISTORY EXPLANATION |
|-----------------------|-------------------------|--|
| | | <p>Under ICD-10 Codes that Support Medical Necessity Group 1: Codes added E75.244. This revision is due to the Annual ICD-10 update and is effective on 10/1/21.</p> <p>Under Article Text: Removal of claim information.</p> |
| 10/01/2019 | R1 | 10/01/2019: This article is being revised in order to adhere to CMS requirements per chapter 13, section 13.5.1 of the Program Integrity Manual. Regulations regarding billing and coding were removed from the CMS National Coverage Policy section of the related MoIDX: Biomarkers in Cardiovascular Risk Assessment LCD and placed in this article. |

Associated Documents

Related Local Coverage Documents

Articles

[A55095 - Billing and Coding: MoIDX: ApoE Genotype](#)

[A54976 - Billing and Coding: MoIDX: Arrhythmogenic Right Ventricular Dysplasia/Cardiomyopathy \(ARVD/C\) Testing](#)

[A54979 - Response to Comments: MoIDX: Biomarkers in Cardiovascular Risk Assessment](#)

LCDs

[DL36360 - \(MCD Archive Site\)](#)

[DL36362 - \(MCD Archive Site\)](#)

[L36362 - MoIDX: Biomarkers in Cardiovascular Risk Assessment](#)

Related National Coverage Documents

N/A

Statutory Requirements URLs

N/A

Rules and Regulations URLs

N/A

CMS Manual Explanations URLs

N/A

Other URLs

N/A

Public Versions

| UPDATED ON | EFFECTIVE DATES | STATUS |
|------------|------------------|------------------------------------|
| 02/23/2023 | 01/01/2023 - N/A | Currently in Effect (This Version) |

| UPDATED ON | EFFECTIVE DATES | STATUS |
|------------|-------------------------|------------|
| 01/14/2022 | 10/01/2021 - 12/31/2022 | Superseded |
| 12/28/2021 | 10/01/2021 - N/A | Superseded |

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Keywords

N/A