

Reimbursement Information for EchoGo® Heart Failure



EchoGo® Heart Failure is designed as an advanced tool to enhance the diagnosis and management of heart failure and its phenotypes, beginning with heart failure with preserved ejection fraction (HFpEF). It offers invaluable assistance to healthcare professionals by leveraging artificial intelligence (AI) to detect HFpEF using a single commonly acquired view of an echocardiogram, improving detection and aiding clinicians in delivering effective patient management.

▶ Enhances Heart Failure Diagnosis

EchoGo® Heart Failure resulted in a statistically significant improvements in detection (reclassified 74% of non-diagnostic results from current clinical algorithms).¹

Improves Treatment Access

Quickly identified HFpEF, with reports in up to 30 minutes, improving access to life-saving new therapies.²

Streamlined, Scalable Management

Connected through EchoGo®; a HIPAA-compliant web interface and cloud platform, which is easy to integrate and scale, and requires zero training.



EchoGo[®] Heart Failure is Eligible for Reimbursement

The following table provides CPT-10 coding for EchoGo® Heart Failure and 2023 Medicare national average reimbursement (technical component) for physician and hospital outpatient and inpatient settings of care. This additional payment is meant to help drive the adoption of new, clinically validated technology by helping cover the cost of the software.

Note: In the Hospital Outpatient setting, the EchoGo® Heart Failure analysis is a separate payable service from the echocardiogram. In the Hospital Inpatient setting, the New Technology Add-on Payment (NTAP) may be available if the total cost of care exceeds the MS-DRG payment. Medicare will pay \$0.65 on every dollar of excess cost up to a maximum of \$1023.75

ICD-10-PCS code

NTAP	NTAP XXE2X19 Al decision support system, indicated as a diagnostic aid for patients undergoing routine functional cardiovascular assessment using echocardiography.	\$1,023.75	Hospital Inpatient
APC	APC 5743 Echocardiography image post processing for computer aided detection of heart failure with preserved ejection fraction, including interpretation and report.	\$284.88	Hospital Outpatient



ICD-10-CM codes

ICD-10-CM (diagnosis) codes were implemented October 1, 2015. It is the physician's ultimate responsibility to select the codes that appropriately represent the service performed, and to report the ICD-10-CM code based on his or her findings or the pre-service signs, symptoms or conditions that reflect the reason for doing the assessment.

Examples are provided that relate to heart failure diagnosis:

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D86	Sarcoidosis
D86.8	Sarcoidosis of other sites
D86.85	Sarcoid myocarditis
105	Rheumatic mitral valve diseases
105.0	Rheumatic mitral stenosis
105.1	Rheumatic mitral insufficiency
105.2	Rheumatic mitral stenosis with insufficiency
105.8	Other rheumatic mitral valve diseases
105.9	Rheumatic mitral valve disease, unspecified
106	Rheumatic aortic valve diseases
106.0	Rheumatic aortic stenosis Other rheumatic heart diseases
109.0	Other specified rheumatic heart diseases
109.81	Rheumatic heart failure
111.0	Hypertensive heart disease with heart failure
1130	Hypertensive heart and chronic kidney disease with heart
	failure and stage 1 through stage 4 chronic kidney disease, or
	unspecified chronic kidney disease
1132	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease
121.0	ST elevation (STEMI) myocardial infarction of anterior wall
121.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
121.02	ST elevation (STEMI) myocardial infarction involving left anterior descending
	coronary artery
121.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of
	anterior wall
121.1	ST elevation (STEMI) myocardial infarction of inferior wall
121.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
121.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
121.2	ST elevation (STEMI) myocardial infarction of other sites
121.29	ST elevation (STEMI) myocardial infarction involving other sites
121.3	ST elevation (STEMI) myocardial infarction of unspecified site
121.9 150	Acute myocardial infarction, unspecified Heart failure
150.10	Left ventricular failure, unspecified
150.20	Unspecified systolic (congestive) heart failure
150.21	Acute systolic (congestive) heart failure
150.22	Chronic systolic (congestive) heart failure
150.23	Acute on chronic systolic (congestive) heart failure
150.30	Unspecified diastolic (congestive) heart failure
150.31	Acute diastolic (congestive) heart failure
150.32	Chronic diastolic (congestive) heart failure
150.33	Acute or chronic diastolic (congestive) heart failure
150.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure
150.41	Acute combined systolic (congestive) & diastolic (congestive) heart failure
150.42	Chronic combined systolic (congestive) & diastolic (congestive) heart failure
150.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure
150.8	Other heart failure
150.810	Right heart failure, unspecified
150.811	Acute right heart failure
150.812	Chronic right heart failure
150.813	Acute on chronic right heart failure
I50.814 I50.82	Right heart failure due to left heart failure Biventricular heart failure
150.82	High output heart failure
150.84	End stage heart failure
150.89	Other heart failure
150.9	Heart failure, unspecified
197	Intraoperative and postprocedural complications and disorders of
	circulatory system, not elsewhere classified
1971	Other postprocedural cardiac functional disturbances

Other postprocedural cardiac functional disturbances

Postprocedural heart failure

Heart transplant failure

Complications of heart transplant

Complications of heart-lung transplant

Payment Methodologies for Ultrasound Services

Medicare may reimburse for ultrasound services when the services are within the scope of the provider's license and are deemed medically necessary. The following describes the various payment methods by site of service.

Hospital Outpatient

In the hospital outpatient setting, the hospital can bill for the technical component as paid through the Ambulatory Payment Classification (APC) system, APC 5743 has a national average of \$284.88 which will be wage-adjusted for each hospital provider.

Hospital Inpatient

To qualify for the New Technology Add-on Payment (NTAP) in the hospital inpatient setting, patients must be insured by Medicare, analyzed by EchoGo Heart Failure, and the patient's total cost of care must exceed the MS-DRG payment. If these conditions are met, Medicare will pay \$0.65 on every dollar of excess cost up to a maximum of \$1,023.75.

Commercial Reimbursement

In an effort to support EchoGo Heart Failure as a new technology, Ultromics will work with each provider to establish coverage with the commercial payers.

The information provided with this notice is general reimbursement information only; it is not legal advice, nor is it advice about how to code, complete, or submit any particular claim for payment. It is always the provider's responsibility to determine and submit appropriate codes, charges, modifiers, and bills for the services that were rendered. This information is provided as of October 1, 2023, and all coding and reimbursement information is subject to change without notice. Payers or their local branches may have distinct coding and reimbursement requirements and policies. Before filing any claims, providers should verify current requirements and policies with the local payer.



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T86.2

T86.22

T86.3