Cardiac Checklist Coventry Health Care of West Virginia

Please be prepared to provide the **applicable information** from the following list when requesting prior authorization for a cardiac procedure managed by NIA Magellan:\footnote{1}{NIA Magellan refers to National Imaging Associates, Inc.}

1. **Medical chart notes** – all notes from patient chart related to the requested procedure, including patient’s current cardiac status/symptoms, cardiac factors and indications.

2. **Relevant patient information**, including:
   a. Patient age, height, weight, and BMI.
   b. Family history of heart problems (including relationship to member, age at diagnosis, type of event, etc.).
   c. Medical history (e.g. diabetes, hypertension, stroke, arrhythmia, etc.).
   d. Cardiac risk factors.
   e. Previous cardiac treatments, surgeries or interventions (medications, CABG, PTCA, stent, heart valve surgery, pacemaker/defibrillator insertion, surgery for congenital heart disease, etc.).
   f. Problems with exercise capacity (orthopedic, pulmonary, or peripheral vascular disease: distance, heart rate).

3. **Diagnostic or imaging reports from previous tests** (exercise stress test, echocardiography, stress echo, MPI, coronary angiography, etc.).
   a. For cardiac catheterization requests, include EKG results showing relevant changes, left ventricular function test reports, documentation of recent ejection fraction, etc.

4. **Symptom history** (onset, course, new or changing symptoms) related to all pertinent cardiac conditions, such as heart muscle/valvular disease, structural abnormality, infection, exposure to toxins/chemotherapy, etc.

5. **Examination results**, including evaluation of hypertension, heart failure, cardiomyopathy, abnormal rhythm, pulmonary embolus, congenital condition, etc.

6. **Any other documentation that supports the need for the procedure.**

7. **For pediatric patients**, provide all pertinent clinical information supporting the relevant condition, such as:
   a. **Congenital heart disease**, such as cyanosis, failure to thrive, syncope, chest pain, abnormal murmurs, etc.; include documentation related to any prior surgery for congenital heart disease.
   b. **Acquired heart disease**, such as Kawasaki disease, endocarditis, pericarditis, HIV cardiitis, exposure to cardio toxic drugs, newly acquired hypertension, etc.
   c. **Non-cardiac diseases**, such as pulmonary hypertension, in-dwelling catheters, sepsis, thromboembolic events, etc.
   d. **Arrhythmias**, with possibly underlying structural heart disease.

**To initiate an authorization request,**

visit [www.RadMD.com](http://www.RadMD.com)

or call: 800.424.5687

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