



Cardiac Solution Checklist

Please be prepared to provide the applicable information from the following list when requesting preauthorization for a cardiac procedure managed by Magellan Healthcare:

- **Medical chart notes:** All notes from patient chart related to the requested procedure, including patient's current cardiac status/symptoms, cardiac factors, and indications.
- **Relevant patient information, including:**
 - a. **Patient's 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** (e.g., medications, CABG, PTCA, stent, heart valve surgery, pacemaker/defibrillator insertion, surgery for congenital heart disease, etc.).
 - f. **Problems with exercise capacity** (e.g., orthopedic, pulmonary, or peripheral vascular disease; distance; heart rate).
- **Diagnostic or imaging reports from previous tests** (e.g., exercise stress test, echocardiography, stress echo, MPI, coronary angiography, etc.).
 - a. For pacemaker or implantable cardioverter defibrillator (ICD) requests, include EKG and/or telemetry strips showing bradycardia, EKG showing conduction abnormalities, EP study report, and/or tilt table test report, if applicable.
 - b. For cardiac resynchronization therapy requests, include left ventricular function test report indicating LVEF, documentation of CHF symptoms and NYHA class, and/or 12-Lead EKG showing QRS width, if applicable.
 - c. For cardiac catheterization requests, include EKG results showing relevant changes, left ventricular function test reports, documentation of recent ejection fraction, etc.

- d. Cardiac catheterization requests also require the submission of digital images (e.g., DICOM files) from previous procedures. The digital image from a previous MPI, stress echo, heart PET, or other cardiac catheterization is considered to be relevant and necessary clinical information.
- **Symptom history** (onset, course, new, or changing symptoms) related to pertinent cardiac conditions, such as heart muscle/valvular disease, structural abnormality, infection, exposure to toxins/chemotherapy, etc.
- **Examination results**, including evaluation of hypertension, heart failure, cardiomyopathy, abnormal rhythm, pulmonary embolus, congenital condition, etc.
- **Any other document that supports the need for the procedure.**
- **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 documents related to any prior surgery for congenital heart disease.
 - b. **Acquired heart disease**, such as Kawasaki disease, endocarditis, pericarditis, HIV carditis, exposure to cardio toxic drugs, newly acquired hypertension, etc.
 - c. **Noncardiac diseases**, such as pulmonary hypertension, in-dwelling catheters, sepsis, thromboembolic events, etc.
 - d. **Arrhythmias** with possibly underlying structural heart disease.

To request authorization, visit RadMD.com or call 1 (866) 306-9729 toll-free, Monday through Friday, 6 a.m. to 6 p.m., Hawaii time.