The supplier must be able to provide all of these items on request:

- [ ] Standard Written Order (SWO)
- [ ] Beneficiary Authorization
- [ ] Proof of Delivery (POD)
- [ ] Continued Need
- [ ] Continued Use
- [ ] Medical records from treating practitioner as noted below

Medical Records should contain:

Automatic external defibrillators are covered for beneficiaries at high risk for sudden cardiac death (SCD)

A wearable defibrillator (K0606) is covered if the beneficiary meets one of the following criteria:

- Documented episode of ventricular fibrillation or a sustained, lasting 30 seconds or longer, ventricular tachyarrhythmia. These dysrhythmias may be either spontaneous or induced during an electrophysiologic (EP) study, but may not be due to a transient or reversible cause and not occur during the first 48 hours of acute myocardial infarction (MI); or

- Familial or inherited conditions with a high risk of life-threatening ventricular tachyarrhythmia such as long QT syndrome or hypertrophic cardiomyopathy; or

- Either a documented prior MI or dilated cardiomyopathy and a measured left ventricular ejection fraction ≤ 0.35; or

- A previously implanted defibrillator now requires explantation.

A nonwearable defibrillator (K0617) is covered when the beneficiary has one of the following conditions:

- Documented episode of cardiac arrest due to ventricular fibrillation, not due to a transient or reversible cause; or

- Sustained, lasting 30 seconds or longer, ventricular tachyarrhythmia, either spontaneous or induced during an electrophysiologic (EP) study, not associated with acute MI, and not due to a transient or reversible cause; or

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- Familial or inherited conditions with a high risk of life-threatening ventricular tachyarrhythmia such as long QT syndrome or hypertrophic cardiomyopathy; or
- Coronary artery disease with a documented prior MI with a measured left ventricular ejection fraction ≤ 0.35, and inducible, sustained ventricular tachycardia (VT) or ventricular fibrillation (VF) during an EP study. To meet this criterion:
  - MI must have occurred more than four (4) weeks prior to the external defibrillator prescription; and
  - The EP test must have been performed more than four (4) weeks after the qualifying MI; or
- Documented prior MI and a measured left ventricular ejection fraction ≤ 0.30. Beneficiary must not have:
  - Cardiogenic shock or symptomatic hypotension while in a stable baseline rhythm; or
  - Had a coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA) within past 3 months; or
  - Had an enzyme-positive MI within past month; or
  - Clinical symptoms or findings that would make them a candidate for coronary revascularization; or
  - Irreversible brain damage from preexisting cerebral disease; or
  - Any disease (e.g. cancer, uremia, liver failure) other than cardiac disease associated with a likelihood of survival less than one year; or
- Beneficiary has ischemic dilated cardiomyopathy, documented prior MI, New York Heart Association (NYHA) Class II and III heart failure, and measured left ventricular ejection fraction (LVEF) ≤ 35%; or
- Beneficiary has nonischemic dilated cardiomyopathy > 3 months, NYHA Class II and III heart failure, and measured LVEF ≤ 35%; or
- Beneficiary meets one of the previous criteria and has NYHA Class IV heart failure; and
- Implantation surgery is contraindicated; or
- A previously implanted defibrillator now requires explantation