

DOCUMENTATION CHECKLIST FOR AUTOMATIC EXTERNAL DEFIBRILLATOR

Policy References:

- Local Coverage Determination (L33690)
- Policy Article (A52458)

Documentation References: Standard Documentation Requirements Policy Article (A55426)

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 for beneficiaries in two circumstances. They meet either both criteria A and B or C, described below.



A. 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**

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 weeks prior to the external defibrillator prescription; and

The EP test must have been performed more than four 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 three 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) \leq 35%; **or**

Beneficiary has nonischemic dilated cardiomyopathy > three 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

- B. Implantation surgery is contraindicated; or
- C. A previously implanted defibrillator now requires explantation.