 <p>KMTSJ, Inc.</p>	DEPARTMENT:	Health Management UM
	SUBJECT:	Cardiac Rehab
	PRODUCT LINE:	All
	POLICY NUMBER:	UM84
	ORIGINAL POLICY EFFECTIVE DATE:	03/10/2017
	LAST REVISED DATE:	03/10/2017
	LAST REVIEWED DATE:	04/13/2023

SCOPE: To ensure Group Health Cooperative of Eau Claire (the Cooperative) consistently and correctly administers cardiac rehabilitation benefits to all members according to policy benefits and medical necessity criteria.

POLICY: It is the policy of the Cooperative to review prior authorization requests for cardiac rehabilitation.


PROCEDURE: Prior Authorization Required: YES

A medically supervised outpatient Phase II cardiac rehabilitation program is considered medically necessary when it is individually prescribed by a physician within a 12-month window after any of the following:

1. Acute myocardial infarction; **OR**
2. Chronic stable angina pectoris unresponsive to medical therapy which prevents the member from doing ADLs or occupational needs (particularly with poor exercise tolerance); **OR**
3. Coronary artery bypass grafting; **OR**
4. Heart transplantation or heart-lung transplantation; **OR**
5. Major pulmonary surgery, great vessel surgery, or MAZE arrhythmia surgery; **OR**
6. Percutaneous coronary artery procedures (angioplasty, atherectomy, stenting); **OR**
7. Ventricular assistive device placement; **OR**
8. Sustained ventricular tachycardia or fibrillation; **OR**
9. Sudden cardiac death survivors; **OR**
9. Valve replacement or repair; **OR**
10. Stable congestive heart failure (CHF) with left ventricular ejection fraction (LVEF) of 35% or less and New York Heart Association (NYHA) class II to IV symptoms despite being on optimal heart failure therapy for at least 6 weeks; stable CHF is defined as CHF in persons who have not had recent (less than or equal to 6 weeks) or planned (less than or equal to 6 months) major cardiovascular hospitalizations or procedures.

Cardiac rehabilitation programs are not recommended and are considered experimental and investigational for members with:

1. Coronary artery disease (CAD) who have any of the following conditions:
 - a. Acute pericarditis or myocarditis; **OR**
 - b. Acute systemic illness or fever; **OR**
 - c. Forced expiratory volume less than 1 liter; **OR**
 - d. Moderate to severe aortic stenosis; **OR**
 - e. New-onset atrial fibrillation; **OR**
 - f. Recent thromboembolic event or thrombophlebitis; **OR**
 - g. Third-degree heart block without pacemaker; **OR**
 - h. Uncontrolled diabetes; **OR**
2. Postural tachycardia syndrome; **OR**
3. CVA or TIA; **OR**
4. Inability to exercise due to debilitation

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Duration of cardiac rehabilitation is determined by the member's level of cardiac risk stratification as determined below:

High Risk

1. High-risk members have any of the following:
 - a. Decrease in systolic blood pressure of 15 mm Hg or more with exercise; **OR**
 - b. Exercise stress test limited to less than or equal to 5 METS; **OR**
 - c. Marked exercise-induced ischemia (angina or \geq 2mm of ST depression on EKG); **OR**
 - d. Myocardial infarction within that last 6 months which was complicated by serious ventricular arrhythmia, cardiogenic shock or CHF; **OR**
 - e. Resting complex ventricular arrhythmia; **OR**
 - f. Severely depressed left ventricular function (LVEF less than 30 %); **OR**
 - g. Survivor of sudden cardiac arrest; **OR**
 - h. Ventricular arrhythmia with exercise or occurring in the recovery phase of stress testing

Cardiac rehabilitation for high risk Members will be approved up to 36 sessions and must include:

1. An educational program to reduce cardiac risk factors; **AND**
2. Education on stress reduction; **AND**
3. Development of an individual home exercise program

Intermediate Risk

1. Intermediate-risk members have any of the following:
 - a. Exercise stress test limited to 6 to 9 METS; **OR**
 - b. $<$ 2 mm of ST depression on EKG during exercise; **OR**
 - c. Uncomplicated myocardial infarction, coronary artery bypass surgery, or angioplasty and has a post-cardiac event functional capacity of 8 METS or less on an exercise stress test


Cardiac rehabilitation for Intermediate risk members will be approved up to 24 sessions and must include development of a home exercise program.

Low Risk

1. Exercise stress test limited to greater than 9 METS

Cardiac rehabilitation for low risk members will be approved up to 6 hours and must include risk factor reduction education and supervised exercise to teach safety and develop a home exercise programs.

Note: Phase III and Phase IV cardiac rehabilitation programs are not covered as these programs are considered educational and training in nature. Educational programs are generally not covered.

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Michelle Bauer MD

APPROVED: _____

DATE: 04/13/2023

REVISION HISTORY:

Rev. Date	Revised By/Title	Summary of Revision
02/18/2019	Michele Bauer, MD, CMO	Reviewed, no changes
04/24/2020	Michele Bauer, MD, CMO	Reviewed. No changes.
04/24/2021	Michele Bauer, MD, CMO	Reviewed. No changes.
04/13/2022	Michele Bauer, MD, CMO	Reviewed. No changes.
04/13/2023	Michele Bauer, MD, CMO	Reviewed. No changes.