Medical Policy
Mobile Cardiac Outpatient Telemetry

Document Number: 010

<table>
<thead>
<tr>
<th>Commercial and Connector/Qualified Health Plans</th>
<th>MassHealth</th>
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</thead>
<tbody>
<tr>
<td>Authorization required</td>
<td>X</td>
</tr>
<tr>
<td>Notification within 24 hours of service or next business day</td>
<td>X</td>
</tr>
<tr>
<td>No notification or authorization</td>
<td></td>
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<tr>
<td>Not covered</td>
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Overview
The purpose of this document is to describe the guidelines Neighborhood Health Plan (NHP) utilizes to determine medical appropriateness for Mobile Cardiac Outpatient Telemetry (MCOT). The treating provider must request prior authorization for MCOT.

Coverage Guidelines
NHP covers MCOT for the treatment of some conditions when such treatment is recommended by the member’s primary care physician or specialty provider, and meets the medical necessity criteria indicated below.

Mobile Cardiac Outpatient Telemetry
NHP covers medically necessary MCOT for one session (i.e., one 30-day session) for members who meet all of the following criteria:

1. 18 years of age or older.
2. Other appropriate testing and/or monitoring (i.e., hospital inpatient telemetry, outpatient continuous rhythm recording, i.e. Holter monitor, or autoactivated rhythm event recording with symptom related memory loop, i.e. event monitor) have been unrevealing.
3. Purpose of MCOT is for evaluating one of the following:
   a. To diagnose the cause of symptoms that are suspected to be caused by an arrhythmia including:
      i. Dizziness
      ii. Syncope
      iii. Pre-syncope
      iv. Palpitations
   b. Evaluation of an arrhythmia during initiation, revision, or discontinuation of anti-arrhythmic drug therapy;
   c. Evaluation of an arrhythmia during recovery from surgical or ablative procedure for arrhythmia or myocardial infarction;
   d. Evaluation of atrial fibrillation as possible etiology after cryptogenic stroke.

Exclusions
NHP does not provide coverage for MCOT for conditions that do not meet the criteria noted above.

Definitions
Arrhythmia: Irregular heart action secondary to a physiological or pathological disturbance in the discharge of electrical impulses or in the electrical transmission that cause dysfunction of the heart pumping mechanism. Examples of arrhythmia include bradycardia and tachycardia. Serious arrhythmias include ventricular tachycardia (VT) and ventricular fibrillation (VF). Both VT and VF are the primary causes of sudden death.
Mobile Cardiac Outpatient Telemetry: An integrated technology and services, which enables ECG recording and concurrent computerized real-time data analysis using EKG storage data greater than 24 hours, and ECG-triggered and patient-triggered events transmitted to a remote attended surveillance center for up to 30 days with a real-time analysis and response regardless of member location.

Presyncope: Symptoms of dizziness or lightheadedness without loss of consciousness.

Effective
April 2017: Annual review.
April 2016: Annual review.
April 2015: Annual review, no significant changes.
April 2014: Annual review, no significant changes.
April 2013: Annual review, no significant changes.
January 2012: Effective Date.

References


Independent board certified practitioner review through MES, 2011
