

North Carolina
State Health Plan
for Teachers and State Employees and
NC Health Choice for Children

www.shpnc.org

Cardiac Rehabilitation
Policy Number: AD0150

Active policy, no longer scheduled for routine review.

Definition:

Cardiac rehabilitation involves treatment and education that lead the cardiac patient to attain maximum physical and psychological function.

Coverage:

Cardiac rehabilitation is covered with limitations as outlined below.

Approval Procedures:

Prior approval is not required.

Limitations and Exclusions:

1. The annual maximum benefit for cardiac rehabilitation program services is the lesser of \$1,800 or 90 days per fiscal year.
2. Cardiac rehabilitation services are covered if rendered in a hospital or in a facility fully certified by the North Carolina Department of Health and Human Services. Services are subject to applicable facility copayment (eg. outpatient hospital department copayment).
3. Coverage is limited to patients with Coronary Artery Bypass Graft (CABG); status/post myocardial infarction; Percutaneous Transluminal Coronary Angioplasty (PTCA) or stent; valve replacement; heart transplantation; or chronic and disabling angina.
4. Cardiac Rehabilitation must be provided within six months of the qualifying event.
5. Charges for dietary programs that are a part of a total cardiac rehabilitation program at a licensed facility under the supervision of an eligible doctor are covered.

Authority:

G.S. 135-42(b)

G.S. 108A-70.21(b)

G.S. 135-40.6(8)m [statute effective through 06/30/2008 for Predecessor Plan]

G.S. 135-40.8(a) [statute effective through 06/30/2008 for Predecessor Plan]

Complete Review of Policy:

December 1989

November 1994

September 2006

September 2008

Revised:

March 2002

April 2004

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