

## Information Required for Transplant Prior Authorization: Initial Request

- All health care records supporting the medical necessity of transplant, specifically:
  - Letter of medical necessity from a transplant service physician
  - Documentation of the patient meeting the requesting institution's transplant candidacy guidelines for the organ(s) to be transplanted. *Please include a copy of the institution's organ-specific candidacy guidelines.*
- History and Physical evaluation from transplant surgeon and/or transplant specialists (e.g, hepatologist, nephrologist)
- Height, weight, and BMI
- History of tobacco and/or nicotine delivery system use
  - If positive, documentation of program's efforts to address use
- Psychosocial evaluation and clearance, to address:
  - Patient's medical compliance
  - Patient's support network
  - Post-transplant care plan, with identification of primary and secondary care providers
  - History of mental health, substance, or legal issues
  - Patient's understanding of surgical risk and post-procedure compliance and follow-up requirements
- Diagnostic studies (within past 6 months):
  - EKG
  - Chest x-ray
  - Echocardiogram
  - Pulmonary function test, if smoking history
  - Cardiac stress test, as indicated
- Dental clearance by dentist, for patients >5 years old
- Specialty clearance:
  - Cardiac clearance for chronic smokers,  $\geq 50$  years old or history of heart disease
  - Pulmonary clearance for history of pulmonary artery hypertension or chronic pulmonary disease
- Age- and sex-appropriate cancer screenings:
  - Colonoscopy, if indicated or if patient is  $\geq 50$  years old. Include surgical pathology report for any samples obtained
  - Gynecologic exam and Pap smear for women  $\geq 21$  years old
  - Mammogram, if indicated or if patient is  $\geq 50$  years old
- Lab results (within past 3 months):
  - Complete blood count, with differential
  - Electrolytes
  - BUN
  - Creatinine
  - Glucose
  - Hemoglobin A1c (if patient has type I or II diabetes mellitus)
  - Calcium
  - Phosphorus
  - Liver enzymes
  - Coagulation profile (INR, prothrombin time)
  - Blood type
  - Serum or urine drug screen
- Infectious Disease screening:
  - HIV

- If HIV positive, documentation showing:
  - CD4 count >200 cells/ $\mu$ L for >6 months
  - Undetectable HIV RNA
  - On stable anti-retroviral therapy for > 3 months
  - No complications from AIDS
- Hepatitis B
- Hepatitis C
- RPR, for adults and sexually active adolescents
- EBV
- CMV
- Tuberculosis testing (PPD, T-spot, or Quantiferon), may be >3 months old if positive
  - Tuberculin skin testing (PPD) is preferable for children <5 years old
- Additional organ-specific testing:
  - Liver: MELD or PELD score, CT or MRI of abdomen, liver biopsy
  - Kidney: GFR and Creatinine clearance (if not on dialysis)
  - Heart: cardiac catheterization, peak VO<sub>2</sub> mL/kg/min
  - Lung: PFT, imaging, and 6-minute walk test
  - Pancreas: c-peptide
  - Bone marrow or Stem cell: bone biopsy, Karnofsky score
- Additional clinical information may be requested based on the patient's past medical history

### **Information Required for Transplant Prior Authorization: Renewal Request**

- History and Physical evaluations from transplant surgeon and/or relevant specialists (e.g., hepatologist or nephrologist) completed since last authorization approval
- Height, weight and BMI, within past 3 months
- CBC, CMP (and Hgb A1c if diabetic), within past 3 months
- Diagnostic tests completed since last authorization approval
- Annual tuberculosis testing
- Annual dental screening
- Annual drug screening, if history of positive substance use
- Updates to psychosocial evaluation annually
- Notification of significant changes to patient's medical or psychosocial history