Dilated Cardiomyopathy Panels

I. Genetic testing for dilated cardiomyopathy (DCM) via a multigene panel is considered **medically necessary** when:

   A. The member has findings characteristic of DCM including all of the following:

      1. Left ventricular enlargement or biventricular dilatation based on echocardiogram or cardiac MRI, **AND**

      2. Systolic dysfunction (e.g., ejection fraction less than 50%) based on echocardiogram, cardiac MRI, or left ventricular angiogram, **AND**

      3. Non-genetic causes of DCM have been ruled out, such as prior myocardial infarction from coronary artery disease, valvular and congenital heart disease, toxins (most commonly, anthracyclines or other chemotherapeutic agents; various drugs with idiosyncratic reactions), thyroid disease, inflammatory or infectious conditions, severe long-standing hypertension, and radiation.

II. Genetic testing for dilated cardiomyopathy (DCM) via a multigene panel is considered **investigational** for all other indications.

NOTE: If a panel is performed, the appropriate panel code should be used

REFERENCES

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3. Wilde AAM, Semsarian C, Márquez MF, et al. European Heart Rhythm Association/Heart Rhythm Society/Asia Pacific Heart Rhythm Society/Latin American Heart Rhythm Society expert consensus statement on the state of genetic testing for cardiac diseases. [published correction appears in Europace. 2022 Aug 30]. Europace. 2022;24(8):1307-1367. doi:10.1093/europace/euac030