Member information

Name: Daniel De Los Santos Marin

DOB: 8/1/1947

Phone: 807-290-1011

Gender: Male

Group ID: NDA

Member ID: U9541367801

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Member ID: U9541367801

State: SC

Smart Auth Approval Probability



Smart Auth Recall %: 100%

Smart Auth Prediction: Approve

Reason for auth decision

Meets the medical necessity criteria for continuous ECG monitoring for 36 sessions.

Auth information

Auth #: PA394839Auth type: OutpatientAuth request type: StandardAuth request date: 4/25/2025Eligibility type:Dates requested: 5/14/2025Service type: 794 (Cardiac Rehabilitation)Place of service: 22Care duration: 36 Days

Provider information

Requesting provider details	Servicing provider details		
Provider name: Amanda R	Provider name: Amanda R		
Facility name: Trident Medical Center	Facility name: Trident Medical Center		
NPI# : 1366496937	NPI# : 1366496937		
Address: 9330 Medical Plaza Dr, Charleston, SC 29406	Address: 9330 Medical Plaza Dr, Charleston, SC 29406		
Speciality: General Acute Care Hospital	Speciality: General Acute Care Hospital		
Phone: 843-970-5021	Phone: 843-970-5021		
Fax: 843-832-5118	Fax: 843-832-5118		
Tin #: 621768106	Tin #: 621768106		

Diagnosis	Diagnosis description
121.4	NSTEMI, non-ST-elevation myocardial infarction
E78.5	Hyperlipidemia
110	Hypertension
N18.9	Chronic Kidney disease

Services requested

Code	Modifiers	Planned service or procedure	Units	Start date	End date
93798	NA	Electrocardiogram	36	5/14/2025	-

State-specific nuances (Contractual or State Mandates):

NA

Vitals

Date	Weight	Temperature	Blood pressure	Pulse	Respiration	Pain	O ² saturation
2/7/2025	85.6 Kg	98.6 F	108/63 mmHg	75	16	-	96%

Lab test results

Date	Test Name	Result	Normal Range	Units
2/6/2025	Basic Metabolic Panel , lipid	Normal		
2/6/2025	Coronary Risk	5.4	<4	
2/6/2025	LDL	101	0-100	mg/dl
2/6/2025	Glucose	117	117	mg/dl

Imaging results

Date	Test Name	Findings	
2/6/2025	Echocardiogram	Stable Ejection Fraction	
2/6/2025	Electrocardiogram	Normal Sinus Rhythm, Left Anterior Fascicular Block	

Current Medications

Medication Name	Dose	Start date	End date	Refills
Aspirin	81mg tab by mouth	NDA		
Atrovastatin	10mg tab by mouth	NDA		
Amlodipine	10 mg tav by mouth	NDA		
Valsartan	320 mg tab by mouth	NDA		
Clopidogrel	75 mg tab by mouth	03/21/2025	03/21/2025	2
carvedilol	3.125 mg tab by mouth	03/21/2025	03/21/2025	2
Hydralazine	50mg tab by mouth	03/21/2025	03/21/2025	2

Reason for decision: Meets medical necessity criteria

Medication changes

Medication plan reconciled

Assessment & treatment plan

Discharge to Home health with plan of care. Diabetic, Cardiac diet. Do activity as tolerated

Conclusion



Data Traceability 07/25/2025, 9:25 AM

Attributes	Source
Member information	Auth Request
Authorization Information	Auth Request
Provider Information	Auth Request
Services requested	Auth Request
Vitals	Medical Record
Lab test results	Medical Record
Imaging results	Medical Record
Assessment & treatment plan	Medical Record
Smart Auth prediction	Assisted decision support