

## CPAP/BiPAP for Obstructive Sleep Apnea

## **Documentation Requirements**

Medicare/Medicaid (Commercial plans follow similar guidelines but are subject to the member's plan.)

- ★ CPAP Prescription
- ★ Medicaid Medicaid Certificate of Medical Necessity
  - □ May replace prescription form if the "plan" section of the CMN lists all equipment and quantity of supplies needed per month.

For initial setup, documents must be in the following order:

- $\star$  Face to face visit assessing the patient for obstructive sleep apnea.
  - □ This should be a comprehensive visit, with the symptoms documented that are related to the potential diagnosis of OSA.
  - □ For Medicaid, this visit must be within the last 6 months.
- ★ Diagnostic polysomnogram that meets one of the following thresholds:
  - AHI, REI, or RDI greater than or equal to 15 events per hour with a minimum of 30 events
  - □ AHI, REI, or RDI is between 5 and 14 events per hour, with a minimum of 10 events and documentation of one of the following:
    - Excessive daytime sleepiness
    - Impaired cognition
    - Mood disorders
    - Insomnia
    - Hypertension
    - Ischemic heart disease
    - History of stroke
  - □ Home based studies require documentation of training provided prior to study, by face to face, video or telephonic instruction.
- ★ For BiPAP therapy, either:
  - □ A titration polysomnogram that shows a CPAP was tried and found ineffective (AHI, RDI, REI, not reduced below criteria above) or
  - □ While on optimal CPAP therapy in the home setting, CPAP is not effective. This includes resolving mask fit issues or pressure setting changes.

## Medicare/Medicaid Compliance

- For patient to receive supplies after 90 days from setup date and insurance to continue to pay for equipment, the following must be completed:
  - Machine download that documents use > or equal to 4 hours/day on 21 out of 30 consecutive days (70%) during the first 90 days of therapy.
  - Face to face visit performed between 31 and 90 days after the equipment setup date.
    - The visit must document the treating practitioner's review of the compliant download and that the patient is benefiting from positive airway therapy.