



Sleep Testing for Obstructive Sleep Apnea (OSA) – JA6534

Related CR Release Date: July 10, 2009

Date Job Aid Revised: July 24, 2009

Effective Date: March 3, 2009

Implementation Date: August 10, 2009

Key Words MM6534, CR6534, R103NCD, OSA, Testing

Contractors Affected

- Fiscal Intermediaries (FIs)
- Medicare Carriers
- Part A/B Medicare Administrative Contractors (A/B MACs)

Provider Types Affected Physicians and providers submitting claims to Medicare Carriers, FIs, or A/B MACs for services provided for Medicare beneficiaries



Change Request (CR) 6534 announces that Medicare will allow for coverage of specified sleep tests for adult beneficiaries based upon clinical evaluation and a suspicion of OSA as contained in Section 240.4.1 of the *National Coverage Determination (NCD) Manual*.

Coverage of Specified Sleep Tests

Provider Needs to Know...

- Effective for claims with dates of service on and after March 3, 2009, Medicare will allow for coverage of the following:
 1. Type I polysomnography (PSG) when used to aid the diagnosis of OSA in beneficiaries who have clinical signs and symptoms indicative of OSA if performed attended in a sleep lab facility;
 2. Type II or Type III sleep testing device when used to aid the diagnosis of OSA in beneficiaries who have clinical signs and symptoms indicative of OSA if performed

unattended in or out of a sleep lab facility or attended in a sleep lab facility;

3. Type IV sleep testing device measuring three or more channels, one of which is airflow, when used to aid the diagnosis of OSA in beneficiaries who have signs and symptoms indicative of OSA if performed unattended in or out of a sleep lab facility or attended in a sleep lab facility; and
4. Sleep testing device measuring three or more channels that include actigraphy, oximetry, and peripheral arterial tone when used to aid the diagnosis of OSA in beneficiaries who have signs and symptoms indicative of OSA if performed unattended in or out of a sleep lab facility or attended in a sleep lab facility.

Other Diagnostic Sleep Tests

- Effective for claims with dates of services on and after March 3, 2009, other diagnostic sleep tests for the diagnosis of OSA, other than those noted above for prescribing continuous positive airway pressure (CPAP), are not sufficient for the coverage of CPAP and are not covered.
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Background

- The Centers for Medicare & Medicaid Services (CMS) has addressed the CPAP in three separate decisions in October 2001, April 2005, and March 2008.
 - In each of those decisions, CMS limited coverage of CPAP in patients with OSA to those patients whose diagnosis was based on specific testing modalities.
 - Initially, CMS limited coverage to OSA diagnosed with PSG. In the latest decision, it expanded coverage to OSA diagnosed with several types of home sleep tests.
 - However, CMS has not specifically addressed coverage of the tests at a national level. In other words, CPAP is nationally covered for beneficiaries with OSA if diagnosed with these specific tests. However, coverage of the specific tests has previously been left to local contractor discretion.
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Operational
Impact

N/A

Reference Materials

The related MLN Matters® article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6534.pdf> on the CMS website.

The official instruction (CR6534) regarding this change may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R103NCD.pdf> on the CMS website.
