

Coverage of Sleep Studies

Brenda Kuder

Kansas Health Policy Authority

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Topics Covered -

- What is a sleep study?
- Types of sleep study
- Why is a sleep study performed?
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- Treatment options
- Data

What is a Sleep Study?

- Sleep studies and polysomnography are tests performed to diagnose a variety of sleep disorders and to evaluate a patient's response to interventional therapies, such as the use of a continuous positive airway pressure machine.
- The test are typically administered in a sleep study center and is attended by staff for continuous and simultaneous monitoring/recording of sleep for six or more hours.
- Physician review, interpretation and report are included as part of the test.

Types of Sleep Study

- **Sleep study** – this test does not include the sleep staging. It may include monitoring/recording of ventilation, respiratory effort, heart rate and oxygen saturation.
- **Polysomnography** – is distinguished from sleep studies by the inclusion of sleep staging.

Why a Sleep Study might be ordered

- **Narcolepsy** – is a syndrome that is characterized by excessive day time sleepiness, disturbed nighttime sleeping, inappropriate sleep episodes or attacks.
- **Sleep apnea** – potentially lethal condition where the patient stops breathing during sleep.
- **Parasomnia** – group of conditions that result in undesirable or unpleasant occurrences during sleep, such as sleepwalking or sleep terrors.
- **Chronic Insomnia**
- **Snoring**

Statistic on Sleep disorders

- 24% of men suffer from some sort of sleep apnea.
- 9% of women, until after menopause and then the percentages are about the same.
- 50% of individuals who have sleep apnea also have a snoring problem.
- It is estimated that approximately 6 million Americans suffer from moderate to severe sleep apnea.
- Approximately 4% of the men and 2% of the women who suffer from sleep apnea meet what is called the "diagnostic criteria" for the disorder. This criteria is an average of 10 apneic episodes over the course of an hour of sleep.

KMAP Current Coverage

- **Adults** – Sleep studies are non-covered for beneficiaries 22 years of age or older.
- **Children** – Sleep studies are covered for children under the Early Periodic Screening Diagnosis and Treatment (EPSDT) program with medical necessity. These services can be considered before they are performed through the pre-determination process, or after they have been rendered by submitting medical necessity with their filed paper claim.

KMAP Coverage Criteria

- Medical necessity indicating why the test is being ordered must be submitted with the request.
- The oxygen saturation level must be 80% or below

Sleep study codes currently covered

- Pre-determination for the following codes will be considered for eligible KanBe Healthy beneficiaries:.
- 95805 - Multiple sleep latency or maintenance of wakefulness
- 95810 - Sleep staging with 4 or more additional parameters of sleep, attended by a technologist.
- 95811 — with initiation of CPAP therapy or bilevel ventilation, attended by a technologist.

Treatment of sleep apnea

- **CPAP** - continuous positive airway pressure. This is the most common treatment and it works well for many people. CPAP is essentially a system that blows air through a mask that gets placed over your nose. The air from the machine passes through the nose, where it flows down the throat and into the lungs. This helps to keep the airways open and clear.
- **biPAP** - bilevel positive airway pressure. This type of device controls both the intake and the outflow of air from the lungs. For example, when inhaling the air pressure is higher than when exhaling. This can help for people who are not able to cope with the constant high air pressure of CPAP.

Medicare Coverage

- Medicare – effective March 3, 2009 coverage of sleep studies is allowed for the diagnosis of obstructive sleep apnea (OSA).
- Coverage of CPAP is initially limited to a 12-week period to identify beneficiaries diagnosed with OSA who benefit from CPAP.
- CPAP is subsequently covered only for those beneficiaries diagnosed with OSA who benefit from CPAP during this 12-week period.
- A diagnosis of OSA for the coverage of CPAP must include a clinical evaluation and a positive test of OSA.
- Education regarding the use/care of the CPAP is required.

KMAP Expenditures for Sleep Studies

	SFY 2007	SFY 2008	SFY 2009
95805	\$119.45	\$18.99	\$69.23
95810	\$6,336.23	\$10,423.62	\$9,857.32
95811	\$698.83	\$1,447.30	\$1,089.93

KMAP Expenditure for CPAP/biPAP

	SFY 2007	SFY 2008	SFY 2009
CPAP Expenditures	\$30,579.75	\$30,443.30	\$37,449.83
biPAP Expenditures	\$3586.28	\$3113.04	\$7845.12
Supplies	\$2900.53	\$2885.33	\$5240.52

Considerations/Questions?

1. Changes in criteria for coverage of sleep studies for children, should we modify the oxygen saturation level from 80% to _____%?
2. Expansion of coverage – utilization, expenditures.
3. Change coverage determinations from pre-determination process to prior authorization?
4. Others?