



MO HealthNet PA Criteria Proposal

Medical Procedure Class:	DME RESPIRATORY ASSIST DEVICE (RAD) WITH BACK-UP RATE - E0471 (RR)
Implementation Date:	5/1/08
Prepared for:	MO HealthNet
Prepared by:	ACS-Heritage Information Systems, Inc.

New Criteria

Revision of Existing Criteria

Executive Summary

Purpose:	To allow a more consistent and streamlined process for authorization of RAD with back-up rate.	
Why was this Issue Selected:	Senate Bill 577 passed by the 94 th General Assembly directs MO HealthNet to utilize an electronic web-based system to authorize Durable Medical Equipment using best medical evidence and care and treatment guidelines, consistent with national standards to verify medical need.	
Procedures subject to Pre-Certification	E0471: Respiratory assist device, bi-level pressure capability with backup rate feature, used with noninvasive interface, e.g. nasal mask or facial mask	
Setting & Population:	All MO HealthNet fee-for-service participants	
Data Sources:	<input checked="" type="checkbox"/> Medicare LCD	<input checked="" type="checkbox"/> MHN Consultants

Setting & Population

- Procedure Group for review: E0471 (RR)
- Age range: All MO HealthNet fee-for-service participants

Approval Criteria

➤ Restrictive Thoracic Disorder

- Medical record documents progressive neuromuscular disease or severe thoracic cage abnormality; and
- Arterial blood gas PaCO₂, done while awake and breathing the patient's usual FIO₂ is greater than or equal to 45 mm Hg; or
- Sleep oximetry, done while breathing the patient's usual FIO₂, demonstrates oxygen saturation less than or equal to 88% for at least five continuous minutes; or
 - Patient has progressive neuromuscular disease, maximal inspiratory pressure is less than 60 cm H₂O or forced vital capacity is less than 50% predicted; and
- Chronic obstructive pulmonary disease does not contribute significantly to the patient's pulmonary limitation.

➤ Severe COPD

- Patient has been re-evaluated no sooner than 61 days after initiation of RAD without back-up rate therapy with device that does not have back-up rate feature.
- Medical record documents compliant use of RAD without back-up rate an average of 4 hours per 24 hour period by time of re-evaluation.
- Patient arterial blood gas PaCO₂, repeated no sooner than 61 days after initiating RAD without back-up rate therapy, done while awake and breathing the patient's usual FIO₂, still remains greater than or equal to 52 mm Hg; and
- Sleep oximetry repeated no sooner than 61 days after initiation of RAD without back-up rate therapy, done while breathing the patient's usual FIO₂, demonstrates oxygen saturation less than or equal to 88% for at least five continuous minutes; and
- Medical record contains signed and dated physician statement, completed no sooner than 61 days after initiation of the RAD without back-up rate, declaring that the patient has been compliantly using the device but the patient does not benefit from its use.

➤ **Central Sleep Apnea or Complex Sleep Apnea**

A complete facility-based, technologist attended PSG must be performed documenting the following:

- The diagnosis of central sleep apnea (CSA) or complex sleep apnea (CompSA) (see definitions in Appendices section) and;
- The ruling out of a single level device (Continuous Positive Airway Pressure Device) as effective therapy if either CSA or OSA is a component of the initially observed sleep-associated hypoventilation; and
- Significant improvement of the sleep-associated hypoventilation with the use of a RAD with back-up rate on the settings that will be prescribed for initial use at home, while breathing the patient's usual FI02.

Approval Diagnosis Codes:

Condition	ICD-9 Codes	Date Range
Obstructive chronic bronchitis	491.20 – 491.22	36 months
Chronic obstructive asthma	493.20 – 493.22	36 months
Chronic Airway Obstruction NEC	496	36 months
Central Sleep Apnea	327.21	36 months
Restrictive Thoracic Disorder related to progressive neuromuscular disorder	N/A	N/A
Restrictive Thoracic Disorder Related To Thoracic Cage Abnormalities	N/A	N/A

Denial Criteria

- It is not medically necessary for patient to have a RAD with back-up rate feature.
- Patient does not have diagnosis of restrictive thoracic disorder related to progressive neuromuscular disease or thoracic cage abnormality; severe obstructive pulmonary disease; central sleep apnea or complex sleep apnea.
- The criteria for restrictive thoracic disorder; severe chronic obstructive pulmonary disease; central sleep apnea or complex sleep apnea are not met.

Approval Period

E0471 (RR): 3 month rental