

## Part B Insider (Multispecialty) Coding Alert

### Unattended Sleep Testing Not Covered

Don't bill Medicare for polysomnography performed in the home or a mobile facility, because the **Centers for Medicare and Medicaid Services** (CMS) decided that unattended testing isn't reasonable or necessary.

Medicare will pay you for continuous positive airway pressure (CPAP) therapy for adult patients with moderate to severe obstructive sleep apnea (OSA), if surgery is a likely alternative to CPAP, according to a May 12 Medlearn Matters article.

**Don't overlook:** You can order and prescribe CPAP devices if your patient's Apnea-Hypopnea Index (AHI) is greater than or equal to 15 events per hour, or greater than or equal to 5 and less than or equal to 14 events per hour with documented excessive daytime sleepiness, impaired cognition, hypertension or ischemic heart disease. You must base your patient's AHI on at least two hours of actual polysomnography recorded sleep.

CMS' implementation date for this decision is June 6.

To read the article, go to [www.cms.hhs.gov/medlearn/matters/mmarticles/2005/MM3843.pdf](http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/MM3843.pdf).