



Aetna Better Health® of Louisiana

Unattended Sleep Studies

<u>Original Issue Date</u>	<u>Next Annual Review</u>	<u>Effective Date</u>
<u>Policy Name</u>		<u>Policy Number</u>
<u>Unattended Sleep Studies</u>		<u>ABHLA-RP-0003</u>
<u>Policy Type</u>		
<u>Medical</u>	<u>Administrative</u>	<u>Pharmacy</u>
		<u>Reimbursement</u>

Aetna Better Health of Louisiana reimbursement policies are intended to provide a general reference for claims filing, coding and documentation guidelines. Coding methodology, regulatory requirements, industry-standard claims logic, benefits design and other factors not listed in this policy statement are considered in the development of reimbursement policies.

In addition to this Policy, reimbursement of rendered services are subject to member benefits, eligibility on the date of service, medical necessity, other plan policies and procedures, claim editing logic, provider contracts and all applicable authorization, notification and utilization management guidelines set forth by the Louisiana Department of Health (LDH) and Centers for Medicare and Medicaid Services (CMS).

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A. Overview

An unattended sleep study is a test that monitors your body's functions while you sleep to detect sleep apnea. These studies are a good option for people who don't have moderate or severe obstructive sleep apnea (OSA), certain medical conditions, or other sleep disorders. Unattended sleep studies are considered necessary for patients with symptoms suggestive of obstructive sleep apnea (OSA) when the home sleep study is part of a comprehensive sleep evaluation using a Type II, Type III, or Type IV device measuring airflow.

B. Policy

This policy is to provide a guide for medical coding and editing guidelines for unattended sleep studies based on Centers for Medicare and Medicaid Services (CMS). According to CMS policy, unattended sleep studies are covered only for the diagnosis of obstructive sleep apnea.

C. Definitions

<u>Term</u>	<u>Definition</u>
<u>Aetna Better Health of Louisiana (ABHLA)</u>	<u>A subsidiary of CVS Health Corporation, Medicaid subsidiary that provides plan management and other administrative services for the Louisiana Medicaid program.</u>
<u>Current Procedural Terminology (CPT)</u>	<u>A medical code set maintained by the American Medical Association (AMA) through the CPT Editorial Panel. The CPT code set (copyright protected by the AMA) describes medical, surgical, and diagnostic services and is designed to communicate uniform information about medical services and procedures among physicians, coders, patients, accreditation organizations, and payers for administrative, financial, and analytical purposes.</u>
<u>Centers for Medicare and Medicaid Services (CMS)</u>	<u>Federal agency that provides health coverage through Medicare, Medicaid, the Children's Health Insurance Program, and the Health Insurance Marketplace. CMS works in partnership with the entire health care community to improve quality, equity, and outcomes in the health care system.</u>
<u>Healthcare Common Procedure Coding System (HCPCS)</u>	<u>Level II of the HCPCS is a standardized coding system that is used primarily to identify products, supplies, and services not included in the CPT codes, such as Ambulance Services, Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) when used outside a physician's office. Because Medicare and other insurers cover a variety of services, supplies, and equipment that are not identified by CPT codes, the level II HCPCS codes were established for submitting claims for these items.</u>
<u>International Statistical Classification of Diseases (ICD-10)</u>	<u>The 10th revision of the (ICD), a medical classification list by the World Health Organization (WHO). It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases.</u>
<u>Medicaid</u>	<u>Medicaid provides health coverage to millions of Americans, including eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities. Medicaid is administered by states, according to federal requirements. The program is funded jointly by states and the federal government.</u>



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<u>Medicare</u>	<u>Medicare is a health insurance program for: people age sixty-five (65) or older, people under aged sixty-five (65) with certain disabilities, and people of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).</u>
<u>CPT/HCPC Codes</u>	<u>Description</u>
<u>95800</u>	<u>Sleep study, unattended, simultaneous recording; heart rate, oxygen saturation, respiratory analysis (e.g., by airflow or peripheral arterial tone), and sleep time.</u>
<u>95801</u>	<u>Sleep study, unattended, simultaneous recording; minimum of heart rate, oxygen saturation, and respiratory analysis (eg, by airflow or peripheral arterial tone).</u>
<u>95806</u>	<u>Sleep study, unattended, simultaneous recording of, heart rate, oxygen saturation, respiratory airflow, and respiratory effort (eg, thoracoabdominal movement).</u>
<u>G0398</u>	<u>Home sleep study test (HST) with type II portable monitor, unattended; minimum of 7 channels: EEG, EOG, EMG, ECG/heart rate, airflow, respiratory effort, and oxygen saturation.</u>
<u>G0399</u>	<u>Home sleep test (HST) with type III portable monitor, unattended; minimum of 4 channels: 2 respiratory movement/airflow, 1 ECG/heart rate and 1 oxygen saturation.</u>
<u>G0400</u>	<u>Home sleep test (HST) with type IV portable monitor, unattended; minimum of 3 channels.</u>
<u>Diagnoses</u>	<u>Description</u>
<u>G47.10</u>	<u>Hypersomnia, unspecified</u>
<u>G47.13</u>	<u>Recurrent hypersomnia</u>
<u>G47.14</u>	<u>Hypersomnia due to medical condition</u>
<u>G47.19</u>	<u>Other hypersomnia</u>
<u>G47.30</u>	<u>Sleep apnea, unspecified</u>
<u>G47.33</u>	<u>Obstructive sleep apnea (adult) (pediatric)</u>

D. Reimbursement Guidelines

In accordance with correct coding, ABH LA will only reimburse for unattended sleep studies (CPT Codes 95800, 95801, 95806 & HCPCS Codes: G0398, G0399, G0400) that are billed with appropriate diagnosis codes of obstructive sleep apnea (G47.10, G47.13-G47.19, G47.30, G47.33).

E. Review/Revision Date

<u>Action</u>	<u>Date</u>	<u>Comments</u>
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<u>Date Issued</u>		<u>Date issued contingent upon LDH approval</u>
<u>Date Revised</u>		
<u>Effective Date</u>		<u>Effective date contingent upon LDH approval</u>

F. Resources

Louisiana Department of Health State Contract, regulations, Provider Manual, fee schedules and notices

<http://www.lamedicaid.com/provweb1/Providermanuals/manuals/PS/PS.pdf>

Individual state Medicaid regulations, manuals & fee schedules

http://www.lamedicaid.com/provweb1/fee_schedules/feeschedulesindex.htm

American Medical Association, Current Procedural Terminology (CPT®) Professional Edition and associated publications and services

<https://www.ama-assn.org/>

Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services <https://www.cms.gov/>

- [A/BMAC/J-N/L33405\(A57496\)/R-05-16-2024-1st Coast](#)
- [A/BMAC/J15/L36902\(A57049\)/R-03-07-2024-CGS](#)
- [A/BMAC/J-J, J-M/L36593\(A56995\)/R-03-07-2024-Palmetto GBA](#)
- [A/BMAC/J5, J8/L36839\(A56903\)/R-07-27-2023-WPS](#)