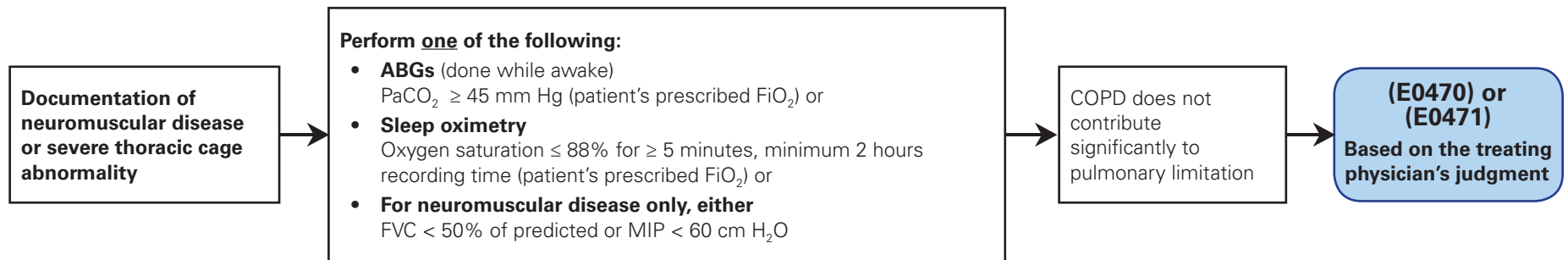
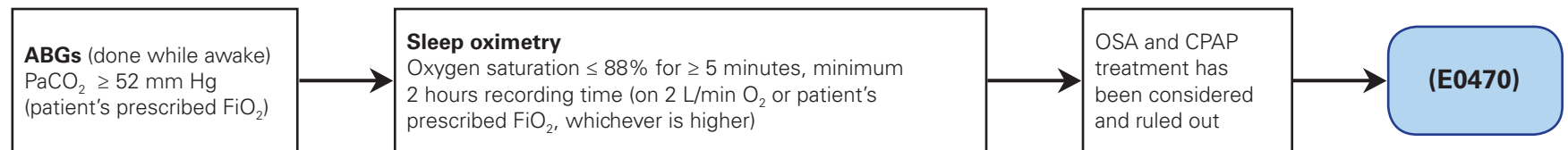


I. Restrictive Thoracic Disorders



II. COPD



For COPD patients to qualify for a RAD with backup rate (E0471):

Situation 1

After period of initial use of an E0470; ABG (done while awake) shows PaCO₂ worsens ≥ 7 mm Hg compared to original ABG result (on patient's prescribed FiO₂); PSG demonstrates oxygen saturation ≤ 88% for ≥ 5 minutes, minimum 2 hours recording time, on an E0470, not caused by obstructive upper airway events (ie, AHI < 5).

Situation 2

No sooner than 61 days after initial use of E0470; ABG (done while awake) shows PaCO₂ ≥ 52 mm Hg (on patient's prescribed FiO₂); Sleep oximetry on an E0470 demonstrates oxygen saturation ≤ 88% for ≥ 5 minutes, minimum 2 hours recording time (on 2 L/min O₂ or patient's prescribed FiO₂, whichever is higher).

Respiratory Assist Device (RAD) Documentation Requirements for Continued Coverage

Patients on an E0470 or E0471 device must be reevaluated no sooner than 61 days after initiating therapy.

Required Documentation

- Progress of relevant symptoms
- Signed and dated statement by treating physician declaring patient using average 4 hours per 24-hour period and patient benefiting from use

ResMed E0470 and E0471 Devices

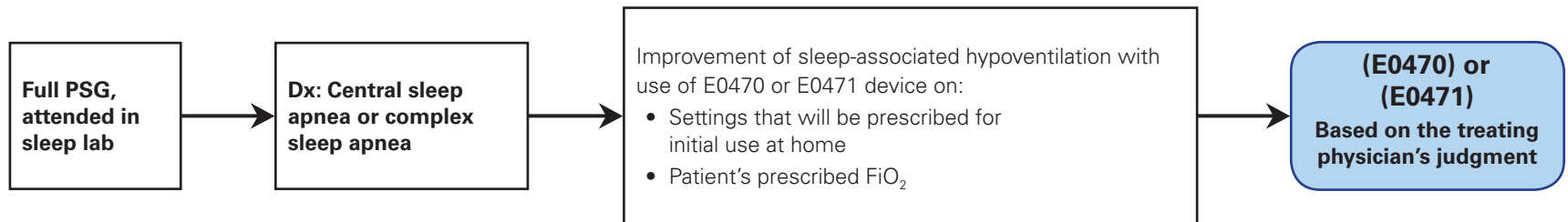
E0470–Bilevel without a backup rate

- VPAP™ Auto 25
- VPAP S

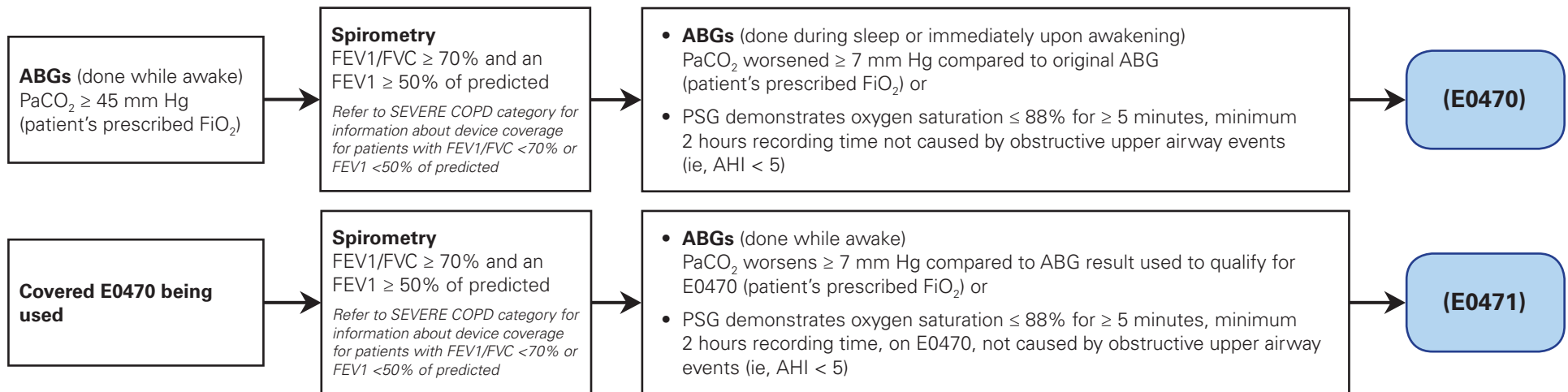
E0471–Bilevel with a backup rate

- VPAP ST
- VPAP Adapt SV™

III. Central Sleep Apnea or Complex Sleep Apnea



IV. Hypoventilation



A diagnosis of **central sleep apnea (CSA)** requires all of the following:

1. An apnea hypopnea index > 5
2. Central apneas/hypopneas $> 50\%$ of the total apneas/hypopneas
3. Central apneas or hypopneas ≥ 5 times per hour
4. Symptoms of either excessive sleepiness or disrupted sleep

Complex sleep apnea (CompSA) is a form of central apnea

- Identified by the persistence or emergence of central apneas or hypopneas upon exposure to CPAP or an E0470 device when obstructive events have disappeared
- CompSA patients have predominately obstructive or mixed apneas during the diagnostic sleep study occurring at ≥ 5 times per hour
- With use of a CPAP or E0470 device, they show a pattern of apneas and hypopneas that meets the definition of CSA

This information is provided as of the date listed, and all coding and reimbursement information is subject to change without notice. It is the provider's responsibility to verify coding and coverage with payors directly. For a full description of the policy go to www.cms.hhs.gov. ResMed reimbursement hotline, dial **1-800-424-0737** and select **option 4**.