

PROVIDACARE

REQUIRED DOCUMENTATION CHECKLIST FOR RESPIRATORY EQUIPMENT

ALL ORDERS FOR OXYGEN SHOULD HAVE THE FOLLOWING:

- Face-to-face medical records within 30 days prior to set up supporting that the patient meets basic coverage criteria specified in the LCD. This will include doctor notes, H&P, discharge summary, records showing actual sats testing and evidence of lung disease or hypoxemia that would benefit from oxygen therapy. This should include diagnosis codes that are cardiology and/or pulmonology related only.
Must be signed by the doctor, cannot be unsigned or preliminary.
- If POX was done to qualify, order for POX and results from IDTF must be included in paperwork.
- Copy of qualifying sats test results (cannot be written on dispensing order or Rx):
 - *Room air 88% or ABG 55 or below while awake. If during sleep, patient must desat for 5 minutes. 89% sats or ABGs are 56-59. Must have additional qualifications. Questions 7-9 on CMN must be completed.*
 - *If hospital discharge, test must be done within 48 hours.*
 - *If a switchover, must have CMN (including recert if applicable) and pick-up ticket from previous supplier.*

IF TESTED DURING EXERCISE/EXERTION:

- | | | |
|---------------------|---|---|
| 1. Sats on room air | 2. Sats on room air
while ambulating | 3. Sats on O ₂
while ambulating |
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ALL ORDERS FOR NEBULIZERS SHOULD HAVE THE FOLLOWING:

- Primary diagnosis 491.0-508.9
- Documentation showing use for the following associated drugs: 491.0-508.9 (Albuterol, arformoterol, budesonide, cromolyn, formoterol, ipratropium, levalbuterol, metaproterenol), 277.02 (Dornas alpha), 277.02, 494.0, 494.1, 748.61, 011.50-011.56 (Tobramycin), 996.80-996.89, 042, 136.3 (Pentamidine), 480.0-508.9, 786.4 (Acetylcysteine)

REQUIRED DOCUMENTATION CHECKLIST FOR RESPIRATORY EQUIPMENT

ALL ORDERS FOR PAP (CPAP & BIPAP) DEVICES SHOULD HAVE THE FOLLOWING:

- Detailed written order with quantity and frequency of supplies.
- Treating/ordering physician's face-to-face note prior to sleep tests to assess for OSA.
- Clinical evaluation contains pertinent information about the following elements: history, physical exam.
- Copy of Medicare-covered sleep test that meets **all** of the following qualifications:
 - *Sleep study must show at least 2 hours of recording time.*
 - *AHI must be 15 or more. If less than 15, must have qualified secondary diagnosis (hypertension, depression, excessive daytime sleepiness documented in doctor notes).*
 - ***Interpreting physician must be Board Certified in sleep medicine.***

ALL ORDERS FOR BIPAP WITH BACK UP RATE OR WITHOUT BACK UP RATE FOR OTHER DX THAN OSA SHOULD HAVE THE FOLLOWING:

- Detailed written order with quantity and frequency of supplies.
- Medical records document symptoms characteristic of sleep-associated hypoventilation (hypersomnolence, excessive fatigue, morning headache, cognitive dysfunction, dyspnea).
- Documentation of one of the following disorders: restrictive thoracic disorder, severe COPD, central sleep apnea or complex sleep apnea, hypoventilation syndrome.
Refer to the complete jurisdiction checklist for details of requirements.