

MEDICARE COVERAGE GUIDELINES

BIPAP/RAD Therapy



Types of BiPAP (Bi-Level Positive Airway Pressure) / RAD (Respiratory Assist Devices)

- **E0470** - Respiratory assist device, Bi-Level pressure capable, **without** backup rate feature, used with noninvasive interface
- **E0471** - Respiratory assist device, Bi-Level pressure capable, **with** backup rate feature, used with noninvasive interface

E0470

- Beneficiary meets all criteria listed for Positive Airway Device (E0601), AND
- E0601 PAP device has been tried and proven ineffective based on a therapeutic trial.
- Sleep test

E0470 and E0471

Central Sleep Apnea or Complex Sleep Apnea

Prior to initiating therapy, a complete facility-based, attended sleep study was performed and documented:

- Diagnosis of either CSA or CompSA, AND:
- Significant improvement of the sleep associate hypoventilation with is of an E0470 or E0471 on the settings the physician prescribed for initial use at home while breathing the usual FIO₂.

Severe COPD E0470

- Arterial blood gas PaCO₂ is ≥ 52 mm Hg while the beneficiary is awake breathing the prescribed FIO₂, AND
- Sleep oximetry study demonstrates oxygen saturation $\leq 88\%$ for ≥ 5 cumulative minutes of nocturnal recording time (minimum of 2 hours) done while breathing oxygen at 2 LPM on the beneficiary's usual FIO₂ (whichever is higher)

Severe COPD E0471

Situation 1: An E0471 started anytime after a period of initial use of E0470 is covered if:

- Arterial blood gas PaCO₂ is ≥ 7 mm Hg while the beneficiary is awake breathing the prescribed FIO₂, AND
- Facility-based sleep study demonstrates oxygen saturation $\leq 88\%$ for ≥ 5 minutes of nocturnal recording time (minimum of 2 hours) while using E0470 that is not caused by obstructive airway events (AHI < 5).

Situation 2: E0471 will be covered no sooner than 61 days after initial use of the E0470 if:

- Arterial blood gas PaCO₂ is ≥ 52 mm Hg while the beneficiary is awake breathing the prescribed FIO₂, AND
- Sleep oximetry while breathing with the E0470 demonstrates oxygen saturation $\leq 88\%$ for ≥ 5 minutes of nocturnal recording time (minimum of 2 hours) done while breathing oxygen at 2 LPM on the beneficiary's usual FIO₂ (whichever is higher)

Hypoventilation Syndrome E0470

- Arterial blood gas PaCO₂ is ≥ 45 mm Hg while the beneficiary is awake breathing the prescribed FIO₂, AND
- Spirometer shows an FEV₁/FVC $\geq 70\%$ and FEV₁ is $\geq 50\%$ of predicted, AND
- Facility-based sleep study demonstrates oxygen saturation $\leq 88\%$ for ≥ 5 minutes of nocturnal recording time (minimum of 2 hours) while using E0470 that is not caused by obstructive airway events (AHI < 5).

Hypoventilation Syndrome E0471

- A covered E0470 is being used, AND
- Spirometer shows an FEV₁/FVC $\geq 70\%$ and FEV₁ is $\geq 50\%$ of predicted, AND
- Facility based sleep study demonstrates oxygen saturation $\leq 88\%$ for ≥ 5 minutes of nocturnal recording time (minimum of 2 hours) while using E0470 that is not caused by obstructive airway events (AHI < 5 while using E0470).

If the beneficiary failed 90 day compliance

- Face to face re-evaluation is needed to determine why the patient failed in compliance for PAP Therapy.
- Repeat Sleep test in a facility-based setting.

Replacement of BiPAP (E0470 or E0471)

Following the 5 year reasonable useful lifetime (RUL), there must be:

- F2F that documented that the beneficiary continues to use and benefit from the device, AND
- A new prescription



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