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Navigating Medicare Coverage Requirements for Continuous Positive Airway Pressure (CPAP) Device for the Treatment of Obstructive Sleep Apnea (OSA)

Navigating Medicare requirements can be difficult; the below step-by-step instructions can help.

I am new to CPAP

To find out if Medicare will cover a CPAP device for you, follow these steps:

1) Go see your doctor and talk about your symptoms

- ▶ Your doctor will document in your records your medical history, your symptoms, and how long you have had sleep issues
- ▶ If your doctor feels CPAP therapy might be needed, you will be sent for a sleep study

2) Get a sleep study

- ▶ Your doctor will review your results and order you a CPAP device if you meet Medicare's coverage guidelines

3) Have your doctor send us a copy of your medical records and the sleep study results

- ▶ If both of these meet Medicare requirements we will contact you to schedule an appointment to be fitted for a mask and pick up your CPAP device

4) Use your CPAP Device!

- ▶ Medicare considers your first 90 days a "trial period"
- ▶ We will download the data on your CPAP device to make sure it is being used enough
- ▶ If you do not use your CPAP device enough Medicare will not pay for it past 90 days

5) See your doctor again within 3 months

- ▶ Go see your doctor again before the 91st day of your treatment (*but not sooner than the 31st day*)
- ▶ Have your doctor send us the medical records from this visit showing that you are benefiting from your CPAP therapy

Your medical records and sleep study results must meet Medicare's documentation requirements and current coverage criteria in order for Medicare to pay for your CPAP device and supplies.

I need CPAP supplies

If you need CPAP supplies and did not get your device from us, follow these steps:

1) See your doctor



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- ▶ Medicare requires that you have seen your doctor within the past 12 months
- ▶ Your doctor should document in your records your ongoing OSA diagnosis and the need to continue CPAP therapy

2) Get a new prescription for your CPAP supplies

- ▶ Ask your doctor for a prescription for all your CPAP supplies

3) Have your doctor send us your CPAP supply prescription and ALL of your previous medical records, which include:

- ▶ Your medical records from the first time you talked to your doctor about your sleep issues
- ▶ Your most recent sleep study results
- ▶ Your compliance download from your 90-day trial period
- ▶ Your medical records from your doctor visit that was within your 90-day trial period

4) Provide us with the make, model, purchase date and your insurance at the time

Copies of your original medical records, your sleep study and your compliance download may also be obtained from your previous CPAP supplier.

Your medical records and sleep study results must meet Medicare's documentation requirements and current coverage criteria in order for Medicare to pay for your CPAP device and supplies.

I need a replacement CPAP device and Medicare paid for my last device

For a replacement CPAP device that Medicare paid for, follow these steps:

1) See your doctor

- ▶ You must see your doctor regarding your OSA and CPAP usage since obtaining Medicare

2) Ask your doctor to send us the following:

- ▶ A prescription for a replacement CPAP device
- ▶ Your medical records that contain information about your OSA, your CPAP usage to date and that you are benefiting from its use, and finally the condition of your current CPAP device

Medicare will only pay for a replacement CPAP device if it is lost, stolen, or irreparable damaged due to a specific incident; or if the equipment is older than 5 years old and is no longer functioning properly.

Your medical records and sleep study results must meet Medicare's documentation requirements and current coverage criteria in order for Medicare to pay for your CPAP device and supplies.



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I need a replacement CPAP device and Medicare did not pay for my last device

For a replacement CPAP device that Medicare did not pay for, follow these steps:

1) See your doctor

- ▶ You must see your doctor regarding your OSA and CPAP usage since obtaining Medicare

2) Ask your doctor to send us the following:

- ▶ A prescription for a replacement CPAP device
- ▶ Your medical records from a doctor visit since having Medicare that contain information about your OSA, your CPAP usage to date, and the condition of your current CPAP device
- ▶ Your most recent sleep study results

Medicare will only pay for a replacement CPAP device if it is lost, stolen, or irreparable damaged due to a specific incident; or if the equipment is older than 5 years old and is no longer functioning properly.

Your medical documentation and sleep study results must meet Medicare's documentation requirements and current coverage criteria in order for Medicare to pay for your CPAP device and supplies.