

Notification of Policy Revisions Effective July 18, 2011 (Posted August 19,2011)

Medical Policy	Revision
Respiratory Assist Device (RAD) for Obstructive Sleep Apnea and Breathing Related Sleep Disorders	<p>New Policy. Policy separated from Obstructive Sleep Apnea (OSA) and Breathing Related Sleep Disorders Treatments policy.</p> <p>Policy contains clinical disorders and CMS coverage criteria for a RAD.</p>
Surgical Treatment of Obstructive Sleep Apnea	<p>New Policy. Policy separated from Obstructive Sleep Apnea (OSA) and Breathing Related Sleep Disorders Treatments policy.</p> <p>Policy contains coverage criteria for surgical procedures on the Prior Approval list that may be rendered in the treatment of OSA.</p>
Positive Airway Pressure (PAP) Therapy For Obstructive Sleep Apnea and Breathing Related Sleep Disorders	<p>New Policy. Policy separated from Obstructive Sleep Apnea (OSA) and Breathing Related Sleep Disorders Treatments policy.</p> <p>Policy contains clinical disorders and CMS coverage criteria for PAP therapy. Added language related to coverage of oral appliances CMS LCD and article.</p> <p>Removed coverage criteria referencing Sleep Tests and Physician credentialing since criteria is not utilized by staff in making organizational determinations for the CPAP/BIPAP.</p>
Skilled Care Services	<p>Revised Policy.</p> <p>Home Infusion Therapy section: added language identifying that member needs to be confined to the home in order to receive covered services, along with language pertaining to safe and effective medication administration in the treatment of illness or injury, as referenced in CMS guidelines.</p>
Immunosuppressant Medications	<p>Revised Policy.</p> <p>Updated to be consistent with CMS LCD. Added coverage indication-“ pancreatic tissue transplantation”. Added statement when medication may be eligible for coverage under Medicare Part D.</p>
Electrical Stimulators- Spinal Cord	<p>Revised Policy to be consistent with CMS guidelines.</p> <p>Removed coverage criteria –“no documentation of drug addiction” from policy. This is not an indication according to NCD 160.7.</p>