Clarification on Medicare Second Trial Period for CPAP 8/23/19

Question to the Medical Directors:

We are following up on the PAP trial failure question that came up last week at the Region B Council regarding the timing of billing the 4th month with KX modifier upon compliance with the second trial period.

Example:

Patient fails the trial period, they subsequently see their physician who documents the etiology of the failure and the patient then has a new diagnostic test to start the second clock. Supplier holds claims while they work with the patient to meet compliance.

Second clock begins (2nd trial) 5/1/19
Patient shows adherence (download) 6/1/19
Follow up office visit 6/14/19

When can the supplier bill the 4th month with the KX modifier?

6/14/19, date where all compliance data and office visit meet coverage criteria

OR

8/2/19, after completion of the 12-week period

There appears to be confusion over the date with which we can begin billing the 4th month – date they meet the coverage criteria or the end of the 12-week trial period. This confusion appears to be prevalent both within CGS and the supplier community.

The list serve message published on 5/16/19 "Correct billing – continued coverage for Positive Airway Pressure (PAP) Devices for the Treatment of Obstructive Sleep Apnea" states: "Only after the new 12-week trial is completed and a new F2F is conducted to assess benefit and objected evidence of adherence is met may the supplier resume billing the KX modifier (i.e. 4th claim in the 13 months capped rental cycle)."

Response from Medical Directors:

We DMDs did discuss this and now Noridian will educate that it <u>does not</u> need to be at the start of month 7, or after a full 12 weeks, for the claim for the second now "successful" trip proven pap to be submitted.

From a DME perspective, we have no limit on number of trials; if we did, it would be in the LCD. It seems to me that it becomes more of a practical matter between the patient and her physician regarding how much is enough, i.e. # of trials. Again, there may be Part A/B limitations on payment for these tests and interpretations that are outside of our jurisdiction that certainly may weigh in on the matter.