

CPAP

Question

On the detailed written order, does the date of order have to be the original date that the cpap or supplies were ordered?

Answer

If the supplier is completing the DWO, the order date would be the date from the original order.

Can a POD supplier signature be initials or does it need to be a full signature?

Yes it can be initials by the supplier

If the length of need on a supply DWO is 12 months is that valid for refills during the 12 month period?

Yes as long as it contains the other information needed to make it a valid order.

What happens to our new cpap patients after the medicare competitive bid gap period ends? If we do not decide to bid, when that time comes, would our patients have to change suppliers or be grandfathered in?

If the supplier is not awarded the CB contract for CPAP, the non-contracted supplier would be able to grandfather the CPAP rental patients.

If a beneficiary fails the initial trial, has a new F2F and sleep study, then we resume billing with month 4 do they have to meet compliance within 12 weeks of the month 4 date of service?

Billing with the KX modifier for the 4th month would resume once the patient has met the compliance requirements including the re-evaluation. The new trial period could be a month or 3 months, depending on the patient.

If during the F2F re-eval for compliance the notes state pt is using every night more than four hours and is benefiting but the Dr. states they're going to change their pressure or switch their mask...would it still be okay to bill month 4 our would this be considered a failure?

Yes it would because the patient has met the requirements for billing month 4 and beyond.

If we identify a Customer Service Rep as being able to receive an order in our Policy and Procedure Manual, is that acceptable or does it have to be an RN or RT who receives the V/O. Does that V/O have to be sent to Dr. for signature?

Any staff with the supplier can accept a verbal order, it does not have to be a clinician.

If a verbal order is received, the physician does not have to sign the verbal order, the supplier would sign the verbal order. Make sure to use date of order, prescribing physician, each item being ordered, patient's name, and include the person with whom is giving the verbal order (physician, nurse).

Do you need a new order every year?

An order can used to prove continued medical need. Also, each state governs the frequency of obtaining orders. Most states require an annual order for CPAP supplies as it falls under Pharmacy guidelines.

Does the HCPC need to be listed on the order?

HCPCS codes are not required on DWO

If the patient cash pays for an item before it is time, is an ABN required?

Yes because it's over-utilization of supplies, the patient needs to be made aware and given options.

We have a Dr. that ordered an E0471 for a patient for centrals and they were not compliant. Patient went back for a new SS and now only needs a E0470 for OSA. Is it possible to go from E0471 to E0470 and if so, how do you properly bill?

Yes it is possible to have a change in medical condition. The different need (diagnosis) show change in medical condition. Make sure documentation is thorough. It does start a new capped rental going to the E0470.

for beneficiary entering medicare, does a face to face with physician need to occur after medicare effective date? or is within last 6 months sufficient?

Within the CPAP policy, it states upon enrollment the patient needs a clinical evaluation with the physician to show continued medical need and benefiting from use. The visit cannot occur prior to enrolling for Medicare FFS.

Can the PCP do the follow-up compliance exam if PAP was ordered by physician from sleep lab or must the f/u be from the prescriber?

There can be a prescriber and the treating physician. The prescriber is the one that read the sleep study and order the machine, the treating physician can follow the patient. Just make sure the treating physician has a copy of the sleep study and order.

Going back to the O2 with CPAP...If pt uses CPAP for OSA, Dr orders a 3 step oximetry test for pt needing O2 24/7 continuously, does this work, instead of sending back for Titration Study with O2 testing?

If the patient qualifies for continuous use, a titration study is not required because it's not for at night only to be used with CPAP. The diagnosis cannot be OSA for the home oxygen. There needs to be a diagnosis that is needing the oxygen to treat it.

If the physician indicates a life time need on a supply detailed written order is that order good for life time resupply or does it expire?

It depends on a few things, such as the state law. Many states require an annual order on CPAP supplies because it falls under the board of pharmacy regulations. And there is continued medical need that is required to be met by Medicare which can be in the form of an order or the medical records, as long as it's within the preceding 12 months. It's best practice to get an order annually to be both requirements.

Does the patient have to be compliant with CPAP although it is not working for them prior to switching to E0470?

No the patient does not have to be compliant. The need can occur during the initial 12 weeks trial period, or after the 12 week trial period.

Do we have to list the CPAP supplies on the WOPD or just the CPAP? Or can this be list on the CMN that the Dr. signs

The DWO that is needed prior to submitting the claim needs each item the patient received itemized.

Clarification of CPAP to RAD if pressure is documented as "too high" another titration is required before BiPAP can be provided?

Not necessarily, the physician can document the issues with that are going on with the CPAP machine and why it's not working.

Can anyone take a verbal order within the supplier organization?

Yes that is acceptable.

Is delivery by UPS and proof of delivery not sufficient? It has to be signed for?

When a shipping service is being used such as UPS, FedEx, or USPS, the confirmation of delivery is part of the proof of delivery for method 2.

So an new order meets requirement of continued need, no need to get a F2F if we are getting new orders every year?

That is correct, it can be an order or the medical record, or both. Either way, timely documentation is within the preceding 12 months.

When dispensing PAP machines, does it have to be calibrated by a respiratory therapist? Are DME supplies required to have an RT on staff?

It all depends on the each state and their laws. Each state sets different regulations for RT involvement. That information can be found at www.palmettogba.com. Under the National Supplier clearinghouse within the state licensure directory.

Is Medicare HMOs required to follow Medicare guidelines as it relates to the 4% requirements

Yes they follow Medicare guidelines unless it states otherwise within their own DME policies. If so, get a copy of their policy.

is there anything stating somewhere that the dr can just sign off on the cpap download that shows he reviewed it if he didn't put the verbage in the chart?

That is acceptable. The physician can sign the download or reference the download information in the chart note, either one is acceptable.

Pt entering into FFS Medicare and has a sleep study.. do we need to have a F2F prior

When the patient is entering Medicare FFS from another payer, Medicare recognizes that other payers may not require a face to face prior to the sleep study. That particular rule falls under Medicare guidelines.

What recourse does a supplier have if a patient does not meet cpap compliance and refuses to sign an ABN or return the item?

Document everything that has occurred between informing the patient of the non-compliance and attempting to get the ABN signed. If the patient does not respond to the attempts made, send the patient an invoice.
