Clinician Checklist
High Liter Flow Oxygen – Greater than 4 LPM

Policy References: Local Coverage Determination Oxygen and Oxygen Equipment (L33797) and Policy Article (A52514)

Documentation References: Standard Documentation Requirements Policy Article (PA) A55426

The treating clinician must complete the following items:

- Standard Written Order (SWO)
- Complete Certificate of Medical Necessity (CMN) Form 484 (sections B and D)
- Medical record documentation requirements (see below)

Medical Documentation

- Beneficiary is mobile within the home
- Beneficiary has severe lung disease or hypoxia related symptoms expected to improve with oxygen therapy; and
- Beneficiary’s blood gas study (BSG) meets criteria noted below; and
- BGS was performed by a physician or qualified provider or supplier of laboratory services; and
- BGS was obtained under the following conditions:
  - If performed during an inpatient hospital stay, the reported test must be the one obtained closest to but no earlier than two (2) days prior to the hospital discharge date; or
    - If not performed during an inpatient hospital stay, the reported test must be performed while the beneficiary is in a chronic stable state – ie., not during a period of acute illness or an exacerbation of their underlying disease; and
    - BGS performed at rest (awake) or during exercise
- Alternative treatments were tried or considered and deemed clinically ineffective. Provide information showing oxygen need in addition to the alternative therapy if required.
- Group I or II performed while on 4 or more LPM
  Group I Criteria:
  - Arterial blood gas (ABG) at or below 55 mm Hg or arterial blood saturation at or below 88%
  - At rest; or
  - During exercise (3 tests); or

The content of this document was prepared as an educational tool and is not intended to grant rights or impose obligations. Use of this document is not intended to take the place of either written law or regulations. Suppliers are reminded to review the Local Coverage Determination and Policy Article for specific documentation guidelines.
According to the document, the criteria for assessment include:

- During sleep (at least 5 minutes); or
- During sleep (signs of hypoxemia)
  - Decrease in ABG more than 10 mm Hg or a decrease in arterial blood saturation of more than 5% from baseline for at least 5 minutes taken during sleep

Group II Criteria:

- ABG between 56 – 59 mm Hg or arterial blood saturation at or above 89%
  - Same testing requirements as Group I; and
- Beneficiary has one of the following conditions
  - Dependent edema, suggesting congestive heart failure; or
  - Pulmonary hypertension or cor pulmonale; or
  - Erythrocythemia with a hematocrit greater than 56%