

Policy References: [Local Coverage Determination Respiratory Assist Device \(RAD\) \(L33800\) and Policy Article \(A52512\)](#)

Documentation References: [Standard Documentation Requirements Policy Article \(PA\) A55426](#)

Hypoventilation Syndrome

For a Respiratory Assist Device (RAD) with a backup rate feature to be covered for hypoventilation syndrome, the treating clinician must fully document in the patient's medical record symptoms characteristic of sleep-associated hypoventilation, such as daytime hypersomnolence, excessive fatigue, morning headache, cognitive dysfunction, dyspnea, etc.

The treating clinician must complete the following items:

- [Standard Written Order \(SWO\)](#)
- Medical record documentation requirements (see below)

A RAD with a backup rate feature is covered for a beneficiary with hypoventilation syndrome if both criteria A, B, and either criterion C or D are met:

- A. A covered RAD without a backup rate feature is being used.
- B. Spirometry shows an FEV1/FVC greater than or equal to 70%.
- C. An arterial blood gas PaCO₂, done while awake, and breathing the beneficiary's prescribed FIO₂, shows that the beneficiary's PaCO₂ worsens greater than or equal to 7 mm HG compared to the ABG result performed to qualify the beneficiary for the RAD without a backup rate feature.
- D. A facility-based PSG or HST demonstrates oxygen saturation less than or equal 88% for greater than or equal to 5 minutes of nocturnal recording time (minimum recording time of 2 hours) that is not caused by obstructive upper airway events – i.e., AHI less than 5 while using a RAD without a backup rate feature (Refer to the Positive Airway Pressure Devices LCD for information about RAD without a backup rate feature coverage for obstructive sleep apnea).

- [Medical record requirements after the first 90-days of RAD therapy](#)