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Healthcare Solutions

# Clinician Checklist
## Hypoventilation Syndrome - RAD without a Backup Rate Feature

**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) without 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 device is covered if both criteria A and B and either criterion C or D are met.

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A. An initial arterial blood gas PaCO2, done while awake and breathing the beneficiary's prescribed FIO2, is greater than or equal to 45 mm Hg.

B. Spirometry shows an FEV1/FVC greater than or equal to 70%.

C. An arterial blood gas PaCO2, done during sleep or immediately upon awakening, and breathing the beneficiary's prescribed FIO2, shows the beneficiary's PaCO2 worsened greater than or equal to 7 mm HG compared to the original result in criterion A (above).

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