noridian
Healthcare Solutions

Clinician Checklist
Restrictive Thoracic Disorder - Respiratory Assist Devices (RAD)

Policy References: Local Coverage Determination Respiratory Assist Device (L33800) and Policy Article (A52512)

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

The treating clinician must complete the following items:

- ☐ Standard Written Order (SWO)
- ☐ Medical record documentation requirements (see below)

For a Respiratory Assist Device (RAD) with or without a backup rate feature to be covered for restrictive thoracic disorder, 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.

Medical Documentation

A bi-level device without backup rate is covered when all of the following criteria are met.

- ☐ There is documentation in the beneficiary's medical record of a neuromuscular disease (for example, amyotrophic lateral sclerosis) or a severe thoracic cage abnormality (for example, post-thoracoplasty for TB).
- ☐ One of the following:
- ☐ An arterial blood gas PaCO2, done while awake and breathing the beneficiary's prescribed
    - ☐ FIO2 is greater than or equal to 45 mm Hg, **or**
    - ☐ Sleep oximetry demonstrates oxygen saturation less than or equal to 88% for greater than or equal to 5 minutes of nocturnal recording time (minimum recording time of 2 hours), done while breathing the beneficiary's prescribed recommended FIO2, **or**
    - ☐ For a neuromuscular disease (only);
        - ☐ Maximal inspiratory pressure is less than 60 cm H20, **or**
        - ☐ Forced vital capacity is less than 50% predicted.
- ☐ Chronic obstructive pulmonary disease does not contribute significantly to the beneficiary's pulmonary limitation.
- ☐ Medical record requirements after the first 90-days of RAD therapy.