Severe Chronic Obstructive Pulmonary Disorder (COPD)

For a Respiratory Assist Device (RAD) with a backup rate feature to be covered for severe COPD, 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:

- Conduct and document a Face-to-Face Evaluation (FTF)
- Complete a 5 Element Order (5EO)
- Sign and date a detailed written order (DWO)

Medical record documentation requirements (see below)

A RAD with a backup rate feature will be covered for a beneficiary with COPD in either of the two situations below, depending on the testing performed to demonstrate the need.

**Situation 1** – For Group II beneficiaries (COPD) who qualified for a RAD without a backup rate feature, a RAD with a backup rate feature started any time after a period of initial use of a RAD without a backup feature is covered if both criteria A and B are met.

- 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 original result from criterion A, (above).
- A facility-based PSG demonstrates oxygen saturation less than or equal to 88% for greater than or equal to a cumulative 5 minutes of nocturnal recording time (minimum recording time of 2 hours) while using a RAD without a backup rate feature that is not caused by obstructive upper airway events – i.e., AHI less than 5. (Refer to the Positive Airway Pressure Devices LCD for information about RAD without a backup rate feature coverage for obstructive sleep apnea).

**Situation 2** – For Group II beneficiaries (COPD) who qualified for a RAD without a backup rate feature, a RAD with a backup rate feature will be covered if, at a time no sooner than 61 days after initial issue of the RAD without a backup rate feature, both of the following criteria A and B are met:

- An arterial blood gas PaCO2 is done while awake and breathing the beneficiary’s prescribed FIO2, still remains greater than or equal to 52 mm Hg.
- Sleep oximetry while breathing with the RAD without a backup rate feature, demonstrates oxygen saturation less than or equal to 88% for greater than or equal to a cumulative 5 minutes of nocturnal recording time (minimum recording time of 2 hours), done while breathing oxygen at 2 LPM or the beneficiary’s prescribed FIO2 [whichever is higher].

**Medical record requirements after the first 90-days of RAD therapy**

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