

DME PROVIDER Manual

*CareCentrix Sleep Management
Program*



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CareCentrix Sleep Management Program

The CareCentrix Sleep Management Program is a program administered by CareCentrix designed to improve the overall quality of sleep services. The program requires prior authorization for sleep diagnostic services in addition to providing the ongoing oversight and adherence management of patients on sleep therapy. CareCentrix network providers will be the exclusive provider of PAP therapy and supplies for CareCentrix Sleep Management Program members. This manual will outline the process for providing PAP therapy and supplies, in addition to explaining the requirements for adherence monitoring and the continued authorization for the provision of equipment and supplies.

Obtaining Authorization for PAP Therapy Devices

Authorization Overview

PAP Therapy devices are authorized in monthly rental units, with the monthly rental units resulting in ownership of the device.

The initial authorization of a PAP Therapy device includes 3 rental units and also includes the authorization of the associated supplies. At the end of the initial 90 day trial period, patient adherence data will be reviewed by CareCentrix to assess if adherent use of the PAP Therapy device is being achieved. If a member is adherent, the remaining rental units will be authorized by CareCentrix.

The CareCentrix Sleep Management Program allows for a member who is borderline adherent to obtain a one month authorization extension. In this scenario, a new authorization number will be generated authorizing 1 rental unit. Adherence must be reevaluated in 30 days. If adherent at that time, the remaining rental units will be authorized with a new authorization number.

As always, remember that authorization is not a guarantee of payment. Payment will be subject to, among other things, the customer's eligibility and benefits on the date of service. For more information, see the CareCentrix Provider Manual.



Obtaining the Initial Authorization for a PAP Therapy Device

- 1) Once you receive a request to set up a patient on CPAP, APAP or Bi-level therapy, a prior authorization is required from CareCentrix in order to deliver these services.
- 2) Log onto the CareCentrix Sleep portal at www.sleepsms.com or the CareCentrix Provider Portal: HomeBridge at www.carecentrixportal.com. If it is your first time accessing the Portal you will need to register and be approved for access to the portal.
- 3) The following information and documentation will be required in order to receive the prior authorization for PAP services:
 - a. The AHI /RDI (if the AHI/RDI is between 5 – 14, supporting documentation must exist to include any of the following: Excessive daytime sleepiness (EDS); Impaired cognition; Insomnia; Mood disorder; Hypertension; Ischemic heart disease; or History of a stroke)
 - b. Copy of both the PSG and Titration Report with completed interpretations.
- 4) Once you receive your authorization number you may proceed with the initiation of services.

Obtaining Authorization for the PAP Therapy Device for the Remaining Rental Period

CareCentrix will submit all requests for authorizations for the remaining rental period on PAP devices based upon the patients' adherence to therapy. CareCentrix will not request authorizations for those patients that are determined to be non-adherent with therapy. Please see page 4 for further detail regarding adherence to therapy.

Obtaining Authorization for Supplies, Loaner or Replacement PAP Therapy Device

Authorization for Supplies

- 1) The initial authorization of a PAP Therapy device includes 3 rental units and also includes the authorization of the associated supplies.
- 2) To obtain authorization for additional supplies you will be required to submit a request through the CareCentrix Sleep portal at www.sleepsms.com or the CareCentrix Provider Portal: HomeBridge at www.carecentrixportal.com.
- 3) You must supply documentation that the patient has been using their PAP Therapy Device for at least 70% of nights for at least 4 hours per night in the last 30 day period.

Authorization for Loaner and Replacement PAP Therapy Devices

In the event of a PAP equipment malfunction of patient owned equipment and the equipment is outside of the manufacturer's warranty period, the following steps are required for authorization of a 30 Day Loaner Unit to assess the equipment's viability:

- 1) Log onto CareCentrix Sleep portal at www.sleepsms.com or the CareCentrix Provider Portal: HomeBridge at www.carecentrixportal.com.
- 2) Select Authorization for Loaner / Replacement PAP Device
- 3) The following information will be required for a 30 day authorization for a loaner PAP Device:
 - a. Documentation that patient is using equipment for at least 70% of nights for at least 4 hours per nights used in the last 30 day period.
 - b. Description of the malfunction of equipment and reason for assessment and repair
 - c. Description of the equipment being assessed for repair



Authorization for a Replacement PAP Therapy Device

- 1) Log onto CareCentrix Sleep portal at www.sleepsms.com or the CareCentrix Provider Portal: HomeBridge at www.carecentrixportal.com.
- 2) Select Authorization for Loaner / Replacement PAP Device.
- 3) The following information will be required to be entered for authorization of a replacement PAP device:
 - a. Documentation that the patient is using equipment for at least 70% of nights for at least 4 hours per nights used in the last 30 day period.
 - b. Documentation/Report from third party manufacturer that existing unit is inoperable and irreparable
 - c. Documented repair costs are greater than rental period payments

Adherence Requirements for Continued Authorization

Adherence:

Adherence is defined as a patient using their equipment for 70% of nights for at least 4 hours per nights used, with improvement of apneic events as captured via therapy AHI improvement from the baseline diagnostic AHI. The data utilized for the adherence determination will be taken from objective adherence data obtained via EncoreAnywhere (Philips/Respironics), AirView (ResMed), or InfoSmart (Fisher Paykel), based upon the equipment utilized by the provider. The data reviewed for the continued authorization of equipment will be the data obtained from the last 30 days of the initial 90 day trial period. If adherent an authorization extension will be issued for the remaining rental units.

Borderline Adherence:

- 1) If the patient has used their equipment for 55-69% of nights for at least 4 hours per nights used, or has used for at least 70% of nights for 3.00 to 3.99 hours per nights used, a "borderline" authorization extension will be recommended yielding an authorization for 30 days.
- 2) If the patient has utilized their equipment less than the above and a material reconfiguration of equipment exists within the last 30 days (ex: pressure change, mask refit, etc.) a "borderline" authorization extension will be recommended yielding an authorization for 30 days.

Non-Adherence:

If adherence documentation does not exist, or the adherence information does not demonstrate adherence as defined above, CareCentrix will not submit an authorization request for the remaining rental period. Any requests for authorizations for patients identified as non-adherent will require the authorization to be requested through the CareCentrix UM Department by faxing Medical necessity documentation from the patient's physician to **(866) 524-9588**. If you have questions, feel free to call the iComply department at 844-457-9972 and one of our associates will assist with your request.



Requirements for PAP Therapy Set-Up and Adherence Monitoring

Required Equipment:

All DME providers participating in the CareCentrix Sleep Management Program must provide patients with minimum equipment standards to include either Philips (Respironics), ResMed or Fisher Paykel PAP Therapy Devices **equipped with modem technology for adherence monitoring purposes**. All PAP Therapy Devices must be equipped to provide **both usage and efficacy** data monitoring.

Required Set-Up Documentation for the Initiation of *iComply* Adherence Monitoring by CareCentrix:

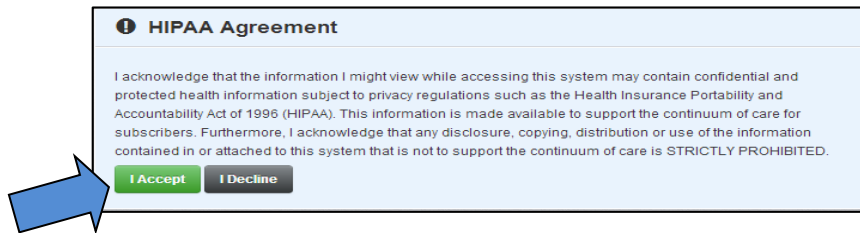
You are required to notify CareCentrix of the progress of all PAP Therapy Set Ups. In order to facilitate the communication of “real time” status updates for your patients, you will utilize the SleepUM Patient Management System. **SleepUM** is where you will be providing information on your patients’ progress. SleepUM will also allow you to set follow up dates to assist you with managing your patients through the PAP Set Up process.

Additionally, upon setting patients up on PAP therapy devices that monitor both usage and efficacy, you will need to provide CareCentrix with the ability to view and access the patient’s therapy adherence data that is transmitting to the device manufacturer web adherence monitoring sites (EncoreAnywhere, Airveiw or Infosmart). Instructions on how to provide this access will be provided to your company during orientation to the program. If you have additional questions regarding this process, please contact one of our iComply team members at 844-457-9972.

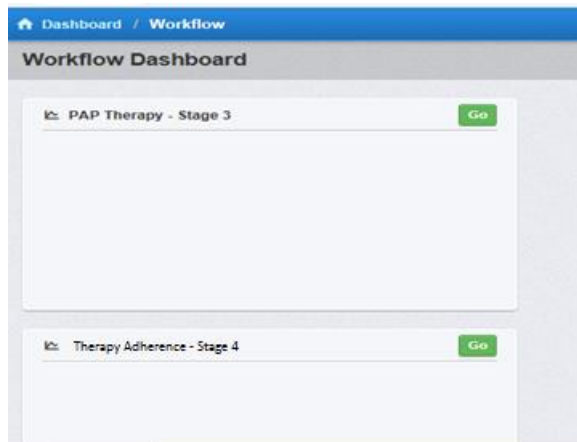
The steps for successfully using the **SleepUM Patient Management System** to update the progress of the PAP Set Up are as follows:

- 1) You may log-in to the SleepUM Patient Management system by typing or clicking the following link: <https://www.sleepum.com/user/login>. You may also access by first navigating to the CareCentrix Provider Portal: HomeBridge at www.carecentrixportal.com and clicking on the link for “**SleepUM**”. Note: Once your account has been activated for the CareCentrix Provider Portal: HomeBridge, you will be emailed a link to create a new password in order to access SleepUM.
- 2) If you are an existing user to SleepUM, enter the same user name and password you have used previously to log into SleepUM. You may be prompted to change your password before logging on if SleepUM has been updated recently.

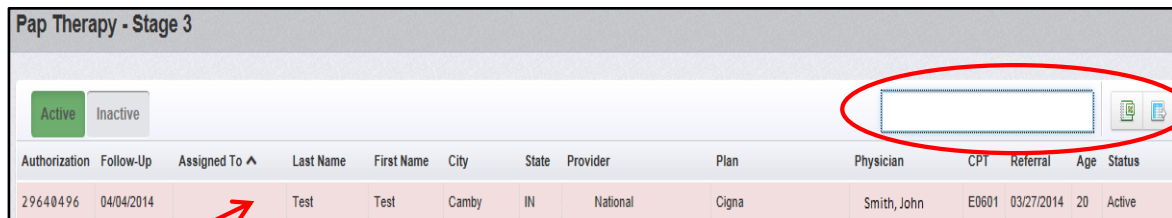
- Review the HIPAA confidentiality notice and indicate your acceptance.



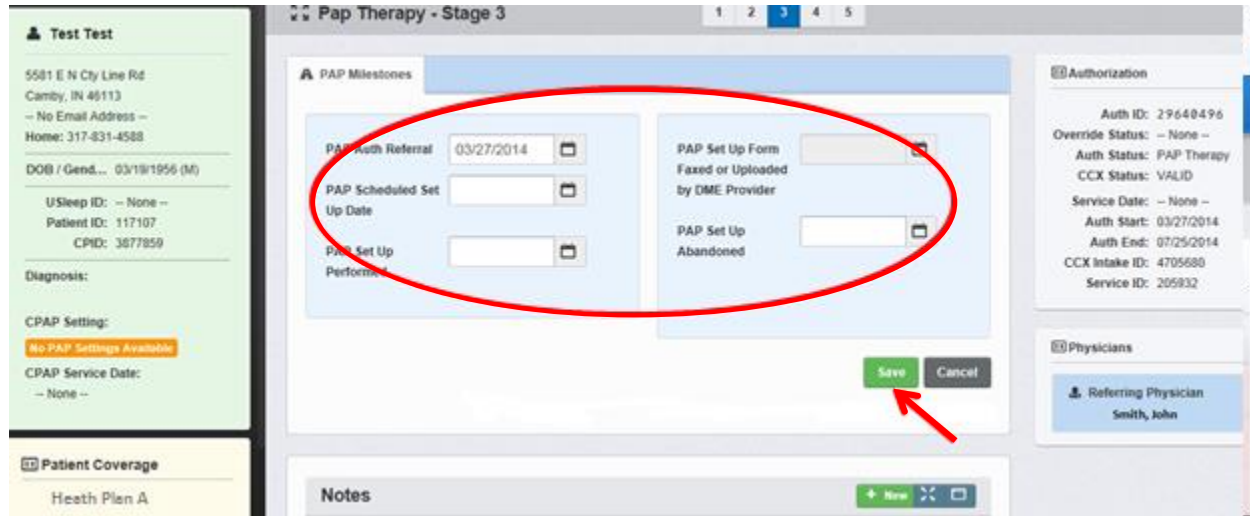
- Once you are logged in, you will see two boxes: One for our patients that have been provided an authorization for a PAP Therapy Set Up; and one box for patients that have been set up on PAP Therapy and are now being monitored for therapy adherence through the iComply program. You will be working out of the PAP Therapy section to provide the real time status updates. The iComply section will provide you with read only access to the patients being monitored in the iComply program. To access the patient information in either area, click the green "Go" box.



- Once you click on the Go Button you will be brought to a list of all the patients requiring a PAP Therapy set up.
- From this view you can search for any patient in the list as well as export the entire list in excel or CSV format.
- To open a patient record, click anywhere on the row where the patient is listed.



- Once you open the individual patient record in the PAP Therapy Section (Patient's Pending PAP Therapy Set Up) you will be able to enter key milestone dates providing the status of the PAP Therapy set up. You will also be able to view any notes associated with the patient, as well as upload the completed Provider Set Up Form.



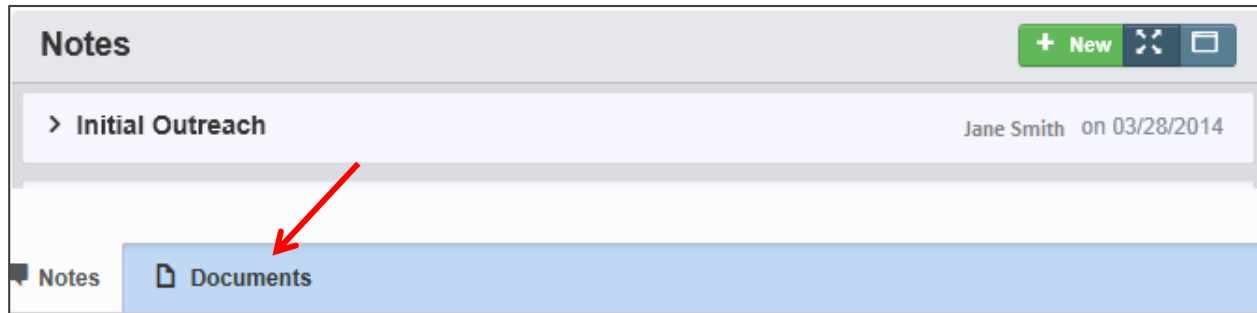
- 9) You will be required to enter in the following milestone dates:
 - a) The date you spoke with the patient and scheduled the PAP Therapy Set Up
 - b) The Actual Date of the Set Up
 - c) The Date the Set Up Form was Faxed or Uploaded into SleepUM.

- 10) After entering each date in the required field, you must click the “Save” Button to confirm the date entered.

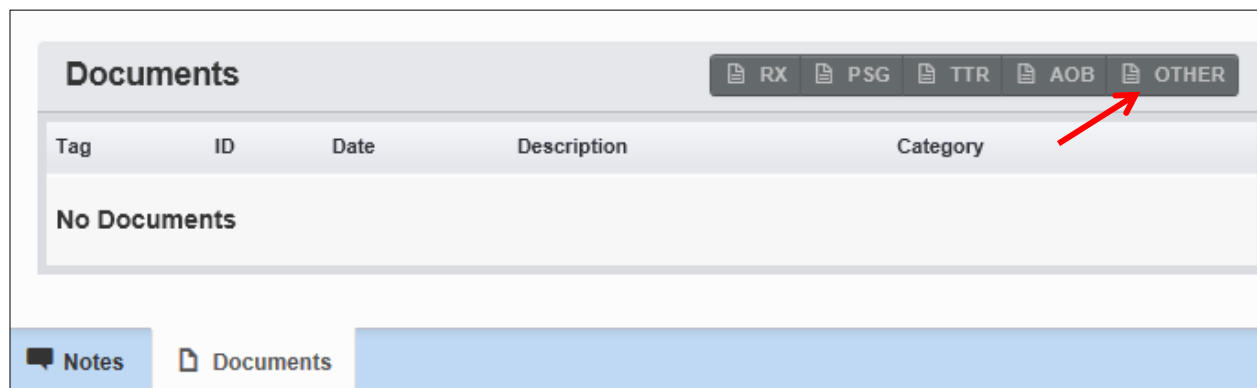
Note: If you are unable to perform the patient set up (for example: unable to reach the patient; the patient refuses; etc.), we would ask that you provide a status by entering the date the set up was canceled in the “PAP Set Up Abandoned” field. You may also add a note in the note section as to why the set up was unable to be completed. This notification is ONLY for notification for the iComply program, and NOT for canceling or editing authorization information.

- 11) After completing the Set Up of your customers on PAP therapy, you will be required to upload or fax the Provider Set Up Form to CareCentrix in order for the customer to be enrolled in the iComply Program. The required information will contain the following:
 - a) Customer Demographic Information
 - b) Contact Information to include home and cell telephone numbers and email address
 - c) The patient’s diagnostic baseline AHI
 - d) Ordering Physician Information
 - e) Equipment and Supply Details
 - f) Any additional notes that may assist the iComply clinician when following up with the patient regarding therapy adherence
 - g) **You are required to Upload or Fax the Provider Set-Up Form to CareCentrix within 48 hours post set-up to: 866-501-4668.**

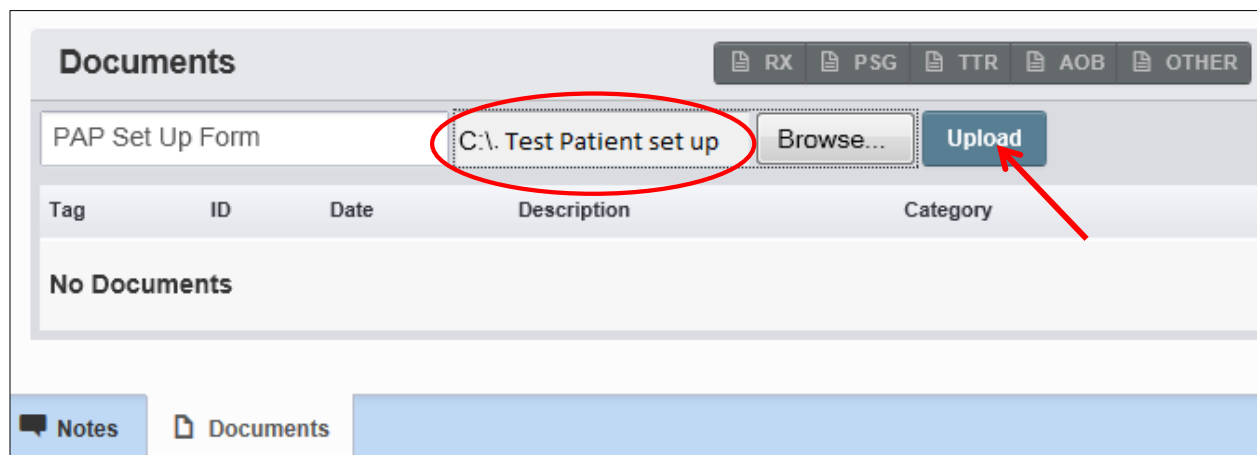
If uploading the Set Up Form directly to SleepUM, click the “Documents” tab below the note section of the record



Select “Other” for the Document Type and the screen will display the ability to upload the completed “ PAP Set Up Form” from your computer.



Select Browse to select your patient’s completed PAP Set Up Form from your computer. Once selected, you will see the name of your document appear next to the Browse button. Type in “PAP Set Up” Form into the description field and Click “Upload”



Click back to the Documents tab to view the document that was uploaded.

Documents				
Tag	ID	Date	Description	Category
<input type="checkbox"/>	b11c0d2d-464f-44a2-9de5-f36edc28a733	04/16/2014	Pap Set Up Form	Other

Notes Documents

- 12) A PDF version of the Set-Up Form can be found on the Provider Portal: HomeBridge at www.carecentrixportal.com under the provider manual section.

CareCentrix iComply Patient Therapy Adherence Program

- 1) Once CareCentrix receives the Provider Set-Up Form, the patient will be entered into the CareCentrix *iComply* Patient Management Program.
- 2) The patient will be contacted by a CareCentrix Sleep Management Program *iComply* team at days 7, 30, 60, 90 and 180 to review adherence and provide the on-going support required to maintain adherence.
- 3) The CareCentrix *iComply* team will require access to your patient's adherence information (usage and clinical efficacy) through EncoreAnywhere (Philips/Respironics), AirView (ResMed) or InfoSmart (Fisher Paykel) based upon your equipment manufacturer preference. This information will be used to assist your patients with therapy adherence and to provide appropriate feedback to your organization as well as to the ordering physician.
- 4) In the event that your patient is experiencing any issues identified during the *iComply* Program's routine call schedule that cannot be resolved telephonically by the CareCentrix *iComply* team, an **Intervention Plan of Care** will be created and forwarded to you so that you may address via a face-to-face intervention within 48 hours.
- 5) Once the Intervention/Plan of Care is completed you are then required to **Fax the completed Patient Intervention / Plan of Care Form to CareCentrix at 866-501-4668 within 24 hours of completion.**

The Intervention / Plan of Care Form will be sent to you by CareCentrix for completion

Adherence Download Schedule

- 1) CareCentrix will obtain objective adherence reports from Encore Anywhere (Philips/Respironics), AirView (ResMed) or InfoSmart (Fisher Paykel), depending on the equipment provided, and an objective adherence report will be forwarded to the ordering physician and the DME provider of record. This objective adherence report will be obtained at Days 30, 60, and 90.
- 2) The data obtained during the Day 90 download will be the data utilized to determine the on-going authorization of the equipment.
- 3) Each therapy adherence report will contain a summary of the nights used and the hours used for those nights. Reports will also include detailed data to show the nights used during the reported period and the efficacy data (AHI, HI, AI, Leak, etc.)