



DME Provider Manual

CareCentrix Sleep Management Program

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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 outlines the process for providing PAP therapy and supplies, in addition to explaining the requirements for adherence monitoring and the authorization of equipment and supplies.

PAP Therapy Devices

When a patient's sleep test determines that a patient would benefit from PAP therapy, the patient may commence a 90-day trial period of PAP therapy. Under the CareCentrix Sleep Management Program, if the patient adheres to the PAP therapy requirements during the 90-day trial period (PAP usage 70% of nights for at least 4 hours per night), the patient can continue with their PAP therapy. If the patient is borderline adherent, the 90-day trial period will be extended by one month. Adherence will be re-evaluated in 30 days. If adherent at that time, the patient can continue with their PAP therapy.

If the patient is not adherent to the Sleep Management Program therapy requirements during the 90-day trial period or, for borderline patients, during the additional 30 day period, the PAP therapy trial period will end unless the patient's treating provider requests and receives authorization to continue PAP therapy.

As always, remember that registration and/or 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](#).

Initiating PAP Therapy

- 1) When you receive a request to set up a patient on CPAP, APAP or Bi-level therapy, register the service with CareCentrix.
- 2) Log onto the CareCentrix Sleep portal at www.sleepsms.com or the CareCentrix HomeBridge® Provider Portal at www.carecentrixportal.com. If it is your first time accessing the Provider 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 register PAP services with CareCentrix:

- 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 a Service Registration Form from CareCentrix, you may proceed with the initiation of services.

Supplies, Loaner or Replacement PAP Therapy Device

Supplies

- 1) The initial trial period of PAP therapy includes 3 rental units for the PAP device and the associated supplies.
- 2) To obtain authorization for additional supplies, you must submit a request through the CareCentrix Sleep portal at www.sleepsms.com or the CareCentrix HomeBridge Provider Portal at www.carecentrixportal.com.

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, but within the 5 year useful life of the PAP, 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 HomeBridge Provider Portal 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.

Replacement PAP Therapy Device

In the event of a PAP equipment malfunction of patient owned equipment, and the equipment is outside the manufacturer's warranty period and the 5 year useful life of the PAP, the following steps are required for authorization of a replacement PAP:

- 1) Log onto CareCentrix Sleep portal at www.sleepsms.com or the CareCentrix HomeBridge Provider Portal 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 that the repair costs are greater than rental period payments.

- 4) Valid physician's order documenting need for a replacement device.

Therapy Adherence Requirements to Continue PAP Therapy Beyond the Initial 90 Day Trial Period

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 is taken from objective adherence data obtained via Care Orchestrator (Philips/Respironics), AirView (ResMed), or iCodeConnect (3B Medical), based upon the equipment utilized by the provider. The data reviewed is the data obtained from the last 30 days of the initial 90 day trial period. If adherent, the patient can continue to receive PAP therapy beyond the trial period, and CareCentrix will issue a Service Registration Form to you regarding the remaining rental units. You are not required to register or request authorization 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, the patient is "borderline" adherent, and the 90 day trial period will be extended 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.), the 90 day trial period will be extended for 30 days.

Non-Adherence:

If adherence documentation does not exist, or the adherence information does not demonstrate adherence as defined above, the PAP trial period will end, unless a request for authorization to continue PAP therapy is submitted to and approved by CareCentrix. Such requests must be submitted to 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 3B Medical 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.

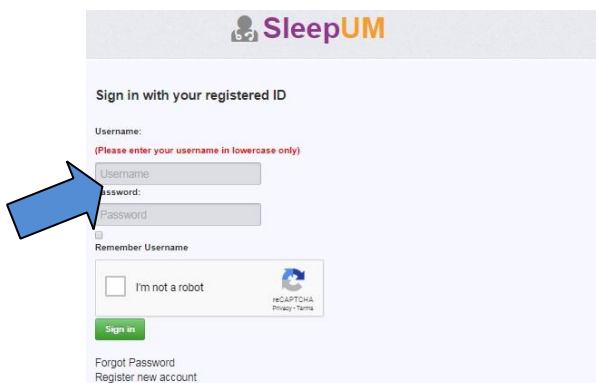
Required Set Up Documentation for the Initiation of *iComply* Adherence Monitoring by CareCentrix:

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 (Care Orchestrator, Airveiw or iCodeConnect). 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 HomeBridge Provider Portal at www.carecentrixportal.com and clicking on the link for “***SleepUM***”.
Note: Once your account has been activated for the CareCentrix HomeBridge Provider Portal, you will be emailed a link to create a new password in order to access SleepUM.
- 2) If you are an existing user of 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.



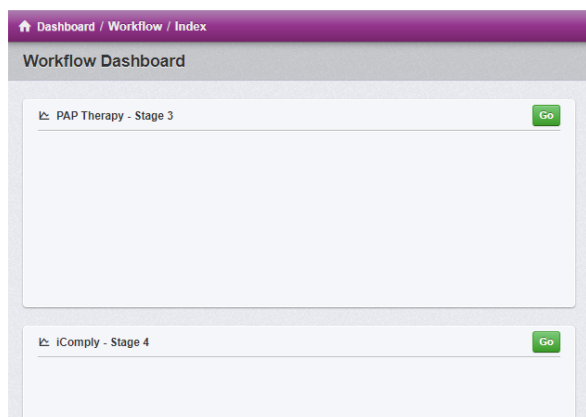
- 3) Review the HIPAA confidentiality notice and indicate your acceptance.

ⓘ HIPAA Agreement

I acknowledge that the information I might view while accessing this system may contain confidential and protected health information subject to privacy regulations such as the Health Insurance Portability and Accountability Act of 1996 (HIPAA). This information is made available to support the continuum of care for subscribers. Furthermore, I acknowledge that any disclosure, copying, distribution or use of the information contained in or attached to this system that is not to support the continuum of care is STRICTLY PROHIBITED.



- 4) Once you are logged in, you will see two boxes: One for our patients that have been provided a Service Registration Form 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.



Dashboard / Workflow / Index

Workflow Dashboard

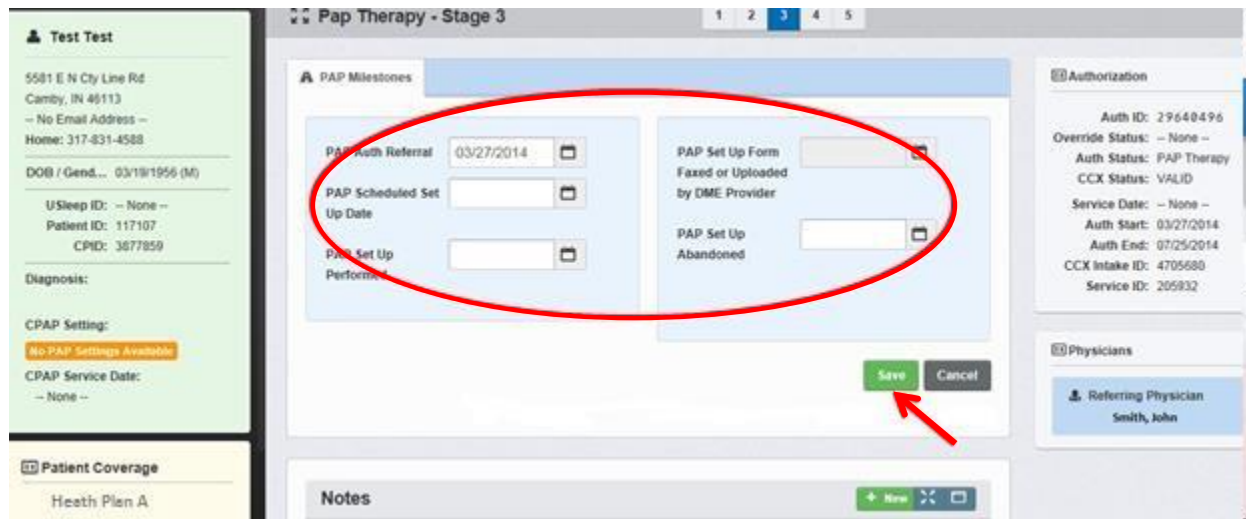
PAP Therapy - Stage 3 Go

iComply - Stage 4 Go

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

Pap Therapy - Stage 3													
<input type="button" value="Active"/> <input type="button" value="Inactive"/>													
Authorization	Follow-Up	Assigned To	Last Name	First Name	City	State	Provider	Plan	Physician	CPT	Referral	Age	Status
29640496	04/04/2014		Test	Test	Camby	IN	National	Cigna	Smith, John	E0601	03/27/2014	20	Active

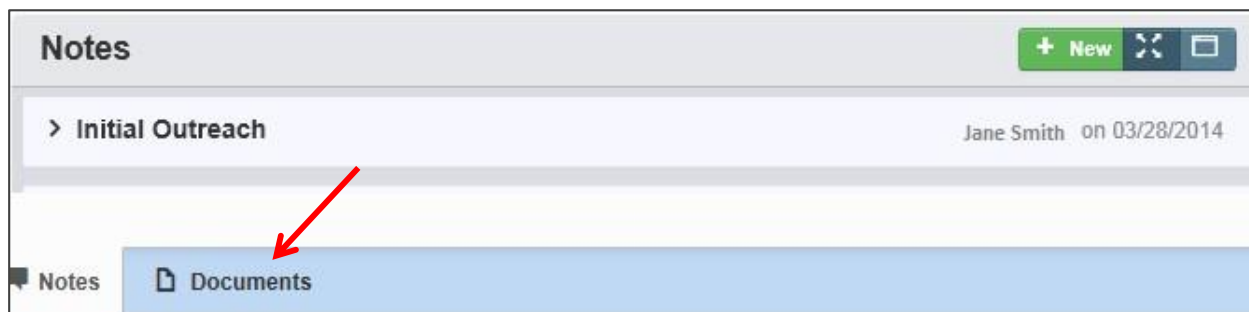
- 8) Once you open the individual patient record in the PAP Therapy Section (Patient's Pending PAP Therapy Set Up), you will be able to enter key milestone dates providing the status of the PAP Therapy Set Up. You will also be able to view any notes associated with the patient, as well as upload the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



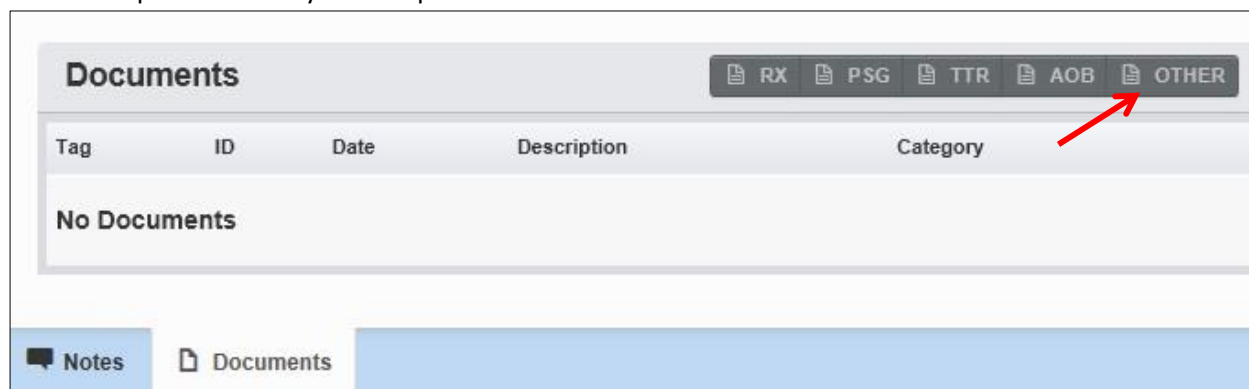
- 9) You will be required to enter in the following milestone dates:
- The date you spoke with the patient and scheduled the PAP Therapy Set Up
 - The Actual Date of the Set Up
 - The Date the Set Up Form was Faxed or Uploaded into SleepUM
- 10) After entering each date in the required field, you must 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:
- Customer Demographic Information
 - Contact Information to include home and cell telephone numbers and email address
 - The patient's diagnostic baseline AHI
 - Ordering Physician Information
 - 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.**

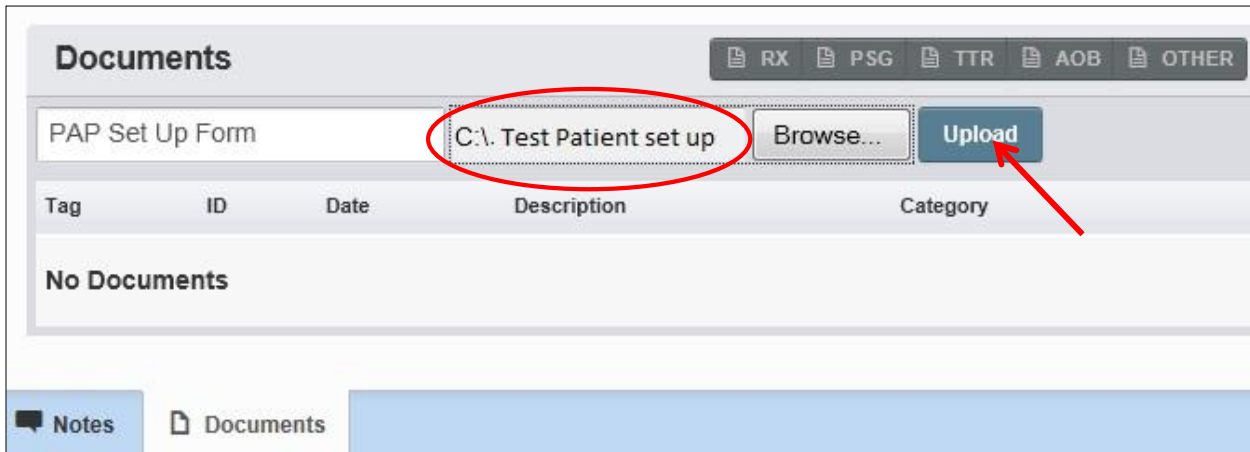
If uploading the Set Up Form directly to SleepUM, click the “Documents” tab below the note section of the record.



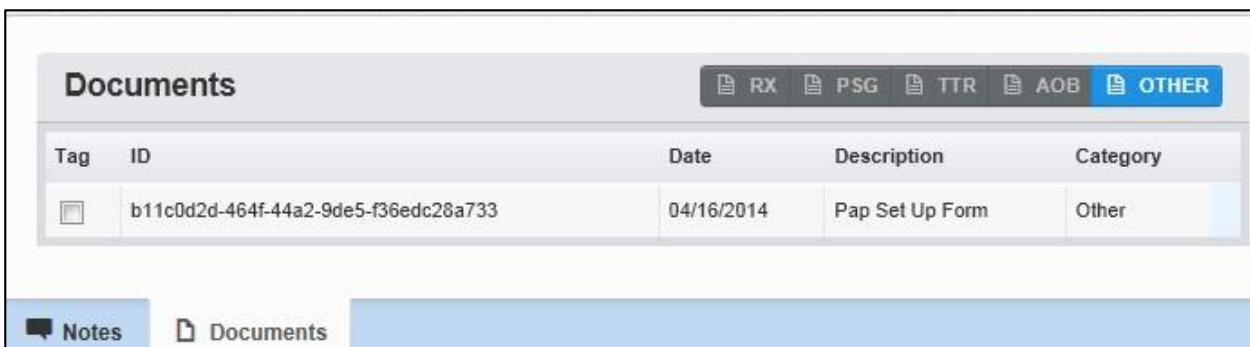
Select “Other” for the Document Type and the screen will display the ability to upload the completed “PAP Set Up Form” from your computer.



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.



12) A PDF version of the Set Up Form can be found on the HomeBridge Provider Portal 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 the 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 Care Orchestrator (Philips/Respironics), AirView (ResMed) or iCodeConnect (3B Medical) 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.**

Adherence Download Schedule

- 1) CareCentrix will obtain objective adherence reports from Care Orchestrator (Philips/Respironics), AirView (ResMed) or iCodeConnect (3B Medical), 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 whether the adherence requirements of the 90 day trial period have been met and whether PAP therapy can continue beyond the initial 90 day trial period.
- 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.).