



CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE (NCPAP) (CPAP)
DME101.002

COVERAGE:

Nasal continuous positive airway pressure is considered eligible for coverage when used for the treatment of clinically significant obstructive sleep apnea or upper airway resistance syndrome in adults when the following indications are present:

- the initial polysomnogram indicates need for treatment;
 - CPAP titration by second polysomnogram or split study (initial diagnostic polysomnogram followed by CPAP titration during polysomnography on the same night) indicates that CPAP reverses the abnormality;
 - the patient tolerates CPAP.
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DESCRIPTION:

Continuous Positive Airway Pressure (CPAP) is a noninvasive provision of air pressure, through a tight fitting nasal mask and flow generator system, to prevent collapse of the oropharyngeal walls during sleep. The therapeutic results of nasal CPAP are often dramatic. Patients often promptly fall into a prolonged sleep marked by long periods of slow-wave and REM (rapid eye movement) sleep. Snoring, obstructive sleep apnea, and all the consequences of apnea are eliminated. Unlike surgical intervention, however, nasal CPAP is only effective when used properly and on a regular basis. Failure to apply nasal CPAP even for a single night results in recurrence of hypersomnolence the next day, although the apneas during that night's sleep are less frequent and not as long as those before CPAP was started. Recent evidence suggests that intermittent use of CPAP by patients is more common than nightly compliance.

RATIONALE:

None

PRICING:

None

DISCLAIMER:

State and federal law, as well as contract language, including definitions and specific inclusions/exclusions, takes precedence over Medical Policy and must be considered first in determining coverage. The member's contract benefits in effect on the date that services are rendered must be used. Any benefits are subject to the payment of premiums for the date on which services are rendered. Medical technology is constantly evolving, and we reserve the right to review

and update Medical Policy periodically.
HMO Blue Texas physicians who are contracted/affiliated with a
capitated IPA/medical group must contact the IPA/medical group for
information regarding HMO claims/reimbursement information and other
general polices and procedures.

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