



Aetna Better Health® of Louisiana

Reimbursement Policy Statement Louisiana Medicaid

Original Issue Date	Next Annual Review	Effective Date	
01/01/2018	05-02-2019	05-02-2019	
Policy Name			Policy Number
Neurology Policy-Polysomnography and Sleep Studies			ABHLA-RP-0010
Policy Type			
Medical	Administrative	Pharmacy	Reimbursement

Aetna Better Health of Louisiana reimbursement policies are intended to provide a general reference for claims filing, coding and documentation guidelines. Coding methodology, regulatory requirements, industry-standard claims logic, benefits design and other factors not listed in this policy statement are considered in the development of reimbursement policies.

In addition to this Policy, reimbursement of rendered services are subject to member benefits, eligibility on the date of service, medical necessity, other plan policies and procedures, claim editing logic, provider contracts and all applicable authorization, notification and utilization management guidelines set forth by the Louisiana Department of Health (LDH) and the Centers for Medicare and Medicaid Services (CMS).

This policy does not ensure either an authorization or reimbursement of services. Please refer to the plan contract for the service(s) referenced therein. If there is a conflict between either this policy or the plan contract, then the plan contract will be the controlling document used to make an authorization or payment determination.

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A. Policy

Aetna Better Health of Louisiana implements comprehensive and robust policies to ensure alignment with Louisiana Department of Health (LDH) and to warrant that regulatory standards are met. According to Aetna policy, providers should not submit two (2) separate polysomnography claims if they perform a split-night service on a single night.

B. Overview

Aetna requires providers to obtain a National Provider Indicator (NPI) and to utilize this indicator when submitting claims for polysomnography sleep study services. Providers with the same NPI may not submit two claims for a single night's service, even when it is a split night.

C. Definitions

Same Group Physician and/or other Health care professional, same group practice- all physicians and/or other health care professionals of the same group reporting the same Federal Tax Identification number.

Polysomnography- a sleep study test used to diagnose sleep disorders. This procedure records your brain waves, the oxygen level in your blood, heart rate and breathing as well as eye and leg movements during the study. It is utilized and covered when used to aid the diagnosis of obstructive sleep apnea (OSA) in beneficiaries who have clinical signs and symptoms indicative of OSA if performed attended in a sleep lab facility.

National Provider Indicator (NPI) - a unique identification number for covered health care providers. Covered health care providers and all health plans and health care clearinghouses must use the NPIs in the administrative and financial transactions adopted under HIPAA.

D. Reimbursement Guidelines

1. For polysomnography services performed in most outpatient departments, Aetna will reimburse providers under OPSS system.
2. For polysomnography services performed by non-hospital providers, Aetna pays under the Physician Fee Schedule. All providers bill utilizing three (3) CPT Codes: 95808, 95810 and split services utilizing CPT code 95811.
3. Aetna requires an appropriate diagnosis code for payment for polysomnography services. Aetna instructs providers to list the condition that justifies the service as the primary diagnosis code. The primary diagnosis should be the one most relevant to the service.

E. Codes/Condition of Coverage

This list is not inclusive.



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http://www.lamedicaid.com/provweb1/fee_schedules/feeschedulesindex.htm

F. Frequently Asked Questions:

Q: What are some examples of diagnoses that Aetna's reimbursements include when treating sleep disorders:

A: Some examples of diagnoses are the following: periodic limb movement disorder (involuntary, jerking movements of the legs during sleep causing excessive daytime sleepiness (EDS) due to sleep fragmentation), parasomnias that are unusual or atypical because of the individual's age at onset, the time, duration or frequency of occurrence of the behavior including, but not limited to: nocturnal seizures, psychogenic dissociative states, REM sleep behavior disorder, sleep talking and/or confusional arousals, narcolepsy, central sleep apnea or complex sleep apnea.

G. Review/Revision Date

Action	Date	Comments
Date Issued	01/01/2018	
Date Revised	04/19/2018	
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H. Resources

Louisiana Department of Health State Contract, regulations, Provider Manual, fee schedules and notices

<http://www.lamedicaid.com/provweb1/Providermanuals/manuals/PS/PS.pdf>

Individual state Medicaid regulations, manuals & fee schedules

http://www.lamedicaid.com/provweb1/fee_schedules/feeschedulesindex.htm

American Medical Association, *Current Procedural Terminology (CPT®) Professional Edition* and associated publications and services

<https://www.ama-assn.org/>

Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services

<https://www.cms.gov/>