

June 1, 2022

TEMPLATE LETTER

Dear Stakeholder:

The Medical Services Commission (the Commission) is aware that some extended healthcare insurers require beneficiaries who have previously been diagnosed with Obstructive Sleep Apnea (OSA) to obtain a new positive diagnostic test prior to being eligible for reimbursement for a replacement device. As such, the Commission considered and determined whether such testing is covered by the Medical Services Plan (MSP) under the *Medicare Protection Act*. In general terms, MSP pays for medically required services. The Commission also has a specific exclusion that services rendered solely for insurance purposes are not covered by the MSP.

After reviewing the issue, it is apparent to the Commission that the practice of retesting asymptomatic patients is contrary to best clinical advice and practices, including for the following reasons:

- 1) OSA is a chronic condition and only in specific circumstances (e.g., after bariatric surgery or substantial sustained weight loss) will a patient's diagnosis change to a point of no longer needing therapy.
- 2) Positive Airway Pressure (PAP) therapy has a carryover effect, and a patient would need to discontinue therapy for several consecutive nights to achieve a valid diagnostic test.
- 3) Home Sleep Apnea Testing (HSAT), while very sensitive to confirming the presence of OSA, is not a very specific test and must not be used to rule out the presence of OSA.
- 4) In 2021, the Commission's Guidelines and Protocols Advisory Committee, in conjunction with the Ministry of Health, introduced a BC provincial standard requisition for HSAT and a new clinical guideline on *Assessment and Management of Obstructive Sleep Apnea in Adults*. These resources provide referring practitioners with clinical advice on appropriate diagnostic testing and follow-up. The guideline states, "there is no need to re-test if the patient is doing well on long-term CPAP therapy and there is no change in clinical status" and the requisition does not indicate retesting of asymptomatic patients who have been previously diagnosed with OSA as medically necessary.
- 5) The Commission's clinical guideline for BC is consistent with other publications on this issue. The use of polysomnography and home sleep apnea tests for the longitudinal management of obstructive sleep apnea in adults is not generally recommended. For example, an American Academy of Sleep Medicine clinical guidance statement, published on June 1, 2021, states that: "Follow-up Polysomnography (PSG) or HSAT is not recommended for routine reassessment of asymptomatic patients with OSA on PAP therapy, however, follow-up PSG or HSAT can be used to reassess patients with recurrent or persistent symptoms, despite good PAP adherence."

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6) Discontinuation of physician-prescribed therapy for the purpose of retesting can pose a risk to patients and must only be undertaken in consultation with the prescribing physician or a sleep disorder physician. This concern is notable for patients with moderate-to-severe OSA, particularly those with safety critical occupations and/or cardiovascular complications.

For clarity, retesting OSA for the purpose of replacement device coverage is <u>not</u> insured by the MSP. As such, practitioners should not be billing MSP for such testing services (and referrals in relation to testing).

Further, the Commission strongly recommends that you ensure that your eligibility coverage requirements for OSA devices do not potentially require patients to stop PAP therapy (thus increasing their personal health risks).

In considering this issue further, we invite you to review the resources discussed in this letter, including the links below:

- American Academy of Sleep Medicine Use of polysomnography and home sleep apnea tests for the longitudinal management of obstructive sleep apnea in adults: an American Academy of Sleep Medicine clinical guidance statement
- Guidelines and Protocols Advisory Committee Provincial Standard Requisition Form
- Guidelines and Protocols Advisory Committee Obstructive Sleep Apnea: Assessment and Management in Adults

On a related note, there were significant changes to the delivery of diagnostic sleep medicine in BC in 2021. One such change is that the College of Physicians and Surgeons of British Columbia has introduced accreditation standards for HSAT and all facilities that provide stand- alone, diagnostic HSAT in BC must now be accredited. To ensure clinical best practices, the Commission encourages insurers to consider the accreditation status of a provider when processing requests to fund OSA therapy devices.

If you have any questions or require further clarification, please contact Robin Henneberry (DFAdmin@gov.bc.ca), Acting Director, Diagnostic Services.

Regards,

Dr. Robert Halpenny Chair Medical Services Commission