

Guidelines for Prescribing Oral Appliances (E0486) for Medicare Patients

To ensure **Government Medicare** coverage for an oral appliance (code **E0486**), please follow these steps:

- In-person Evaluation: The patient must have an in-person clinical evaluation to assess for obstructive sleep apnea <u>before the sleep test</u>. Please ensure the evaluation aligns with the appropriate ICD-10 codes for sleep apnea. (Commercial non-Medicare plans do not follow this requirement, Telemedicine is appropriate).
- 2. Sleep Test Criteria: The patient must undergo a Medicare-covered sleep test:
 - Medicare coverage follows 4% desaturation rule
 - o Medicare requires sleep study within one year of oral appliance prescription
 - IMPORTANT: commercial insurances do not require the home sleep test within one year (within 3 years is acceptable)
 - One of the following must be met:
 - AHI or RDI ≥ 15 events/hour with at least 30 events.
 - AHI or RDI between 5-14 events/hour with at least 10 events, plus at least one of these:
 - 1. Daytime sleepiness, mood issues, or trouble sleeping.
 - 2. High blood pressure, heart disease, or a history of stroke.
 - AHI or RDI > 30 events/hour, and:
 - 3. The patient cannot tolerate a CPAP, or
 - 4. A CPAP is contraindicated, based on your evaluation (documentation of these details required.
- 3. *Prescription*: After reviewing the sleep test results, you can order the oral appliance. The prescribing doctor can be different from the one performing the evaluation.
 - Please see sample prescription required
 - o NOTE: prescriptions MUST be signed/dated (electronically or hand-signed) by referring provider
- 4. **Device Provision**: A licensed dentist (DDS or DMD) will provide and bill for the device.
 - IMPORTANT: DIRECT-TO-CONSUMER COMPANIES ADVERTISING MEDICAL BILLING FOR ORAL APPLIANCES (EX: DAYBREAK) DO NOT UTILIZE LICENSED DENTISTS OR AN IN PERSON COMPREHENSIVE EXAM TO FABRICATE THEIR ORAL APPLIANCES AND DO NOT MEET THE STANDARD OF CARE FOR YOUR PATIENTS OR MEET INSURANCE GUIDELINES.

Please note that the above guidelines are for <u>Medicare patients only</u>. Thank you for your understanding and cooperation with these changes!