Insurance Bulletin

Tufts Health Plan

REGULATIONS FOR SLEEP STUDY ELIGIBILITY

SLEEP HEALTHCENTERS®
...better sleep. better health.

877-SLEEPHC (877-753-3742)
www.sleephealth.com

Effective January 1, 2011

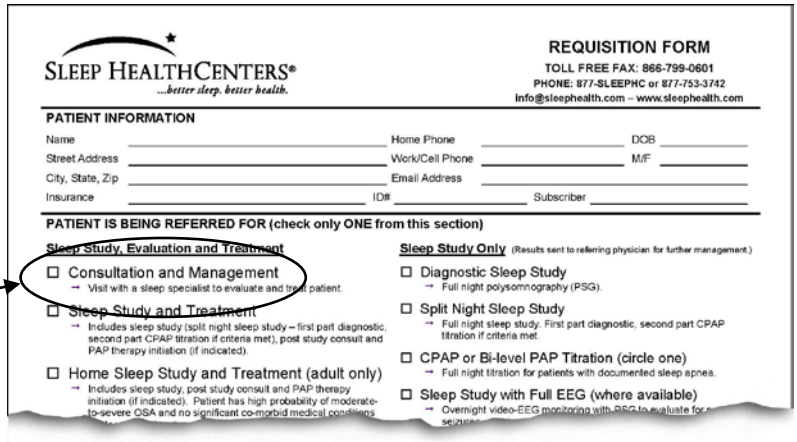
Tufts Health Plan has implemented changes to its prior authorization program for sleep studies and sleep therapy.

Tufts Health Plan has selected a benefits management company to provide sleep management services for its members. Providers must now request prior authorization for sleep studies and related PAP therapy through the benefits management company rather than through Tufts Health Plan. Providers may no longer fax authorization requests for those services to Tufts Health Plan. If you have questions about these new regulations, please contact Tufts Provider Services at 888-884-2404.

Sleep HealthCenters can continue to provide sleep services for your patients.

Sleep HealthCenters is prepared to manage the new Tufts Health Plan process for your patients requiring sleep evaluations and studies.

The simplest way to navigate through these changes is to have Sleep HealthCenters manage the process and paperwork by having your patient evaluated by a Sleep HealthCenters sleep specialist prior to the sleep study.



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REQUISITION FORM
TOLL FREE FAX: 866-799-0601
PHONE: 877-SLEEPHC or 877-753-3742
info@sleephealth.com – www.sleephealth.com

PATIENT INFORMATION

Name _____ Home Phone _____ DOB _____
Street Address _____ Work/Cell Phone _____ M/F _____
City, State, Zip _____ Email Address _____
Insurance _____ ID# _____ Subscriber _____

PATIENT IS BEING REFERRED FOR (check only ONE from this section)

Sleep Study, Evaluation and Treatment

☐ Consultation and Management
→ Visit with a sleep specialist to evaluate and treat patient.

☐ Sleep Study and Treatment
→ Includes sleep study (split night sleep study – first part diagnostic, second part CPAP titration if criteria met), post study consult and PAP therapy initiation (if indicated).

☐ Home Sleep Study and Treatment (adult only)
→ Includes sleep study, post study consult and PAP therapy initiation (if indicated). Patient has high probability of moderate-to-severe OSA and no significant co-morbid medical conditions

Sleep Study Only (Results sent to referring physician for further management.)

☐ Diagnostic Sleep Study
→ Full night polysomnography (PSG).

☐ Split Night Sleep Study
→ Full night sleep study. First part diagnostic, second part CPAP titration if criteria met.

☐ CPAP or Bi-level PAP Titration (circle one)
→ Full night titration for patients with documented sleep apnea.

☐ Sleep Study with Full EEG (where available)
→ Overnight video-EEG monitoring with PSG to evaluate for n
seizures

Simply check off the <u>Consultation and Management</u> option on the Sleep HealthCenters requisition form and submit as usual.

OR, you can choose to manage the patient yourself by providing the required information to Sleep HealthCenters along with your sleep study referral. This involves completing an eligibility form with information on sleep apnea symptoms, co-morbidities and a sleepiness rating scale.

If you have additional questions or need assistance with your referral, please contact us at 877-SLEEP-HC (877-753-3742).