Effective May 1, 2017, CareSource will introduce a new Sleep Studies payment policy for Ohio Medicaid, Ohio Marketplace Plans and Ohio Medicare.

**SUMMARY**
The Sleep Studies payment policy will reimburse participating providers for medically-necessary sleep studies through criteria based on the Centers for Medicare and Medicaid (CMS) Local Coverage Determination (LCD) L36839.

**IMPACT**
Reimbursement policies are designed to assist you when submitting claims to CareSource. The guidelines in the payment policy include the following information:

- The definitions and criteria of polysomnography, which includes the stages of sleep.
- The conditions in which CareSource considers sleep studies/polysomnography to be medically-necessary for patients.
- Prior authorization information: CareSource does not require prior authorization for sleep studies/polysomnography. However, CareSource may request documentation to support medical necessity.
- A non-exhaustive list of CPT codes related to submitting sleep studies claims. Reimbursement is dependent on, but not limited to, submitting CMS-approved HCPCS and CPT codes along with appropriate modifiers.
- **For Ohio Medicaid members:** home sleep testing is NOT covered.

**NEXT STEPS**
The full policy is effective May 1, 2017, and may be found on the CareSource.com Health Partner Policies web page. To access the policy, select the Plan Name and State and reference the Sleep Studies OH Medicaid, OH Marketplace Plans and Ohio Medicare Payment policies. You may refer to the specific policy for more information on:

- Policy criteria and rationale
- Codes, including CPT and ICD-10
- Conditions of Coverage

Thank you in advance for your cooperation in adhering to this new policy requirement.

For the most up to date notifications from CareSource, visit the Updates and Announcements page on CareSource.com.