



WellPoint, Inc.  
120 Monument Circle  
Indianapolis, IN 46204  
(317) 488-6000

May 8, 2013

Samuel Fleishman, MD  
President, American Academy of Sleep Medicine  
2510 North Frontage Road  
Darien, IL, 60561-1511

Dear Dr. Fleishman:

Thank you for your several communications (sample attached) to WellPoint's affiliated health plans requesting a meeting to discuss sleep medicine services and the role they may play in health insurance Exchanges. Your request was received by many of our medical directors and health plan Presidents who represent our affiliated health plans and the nearly 36 million members they support nationwide.

As you may know, WellPoint operates affiliated Blue Cross and Blue Shield health plans across 14 states doing business as Anthem Blue Cross and Blue Shield (in NH, CT, ME, VA, OH, KY, IN, MO, WI, CO and NV); Empire Blue Cross and Blue Shield (in New York); Blue Cross and Blue Shield of Georgia; and Anthem Blue Cross in California.

I hope that you are already aware that WellPoint's affiliated health plans currently provide coverage for sleep management services, subject to the terms of member health benefit plans, including medical necessity. We recognize the importance of sleep management services for our health plan members, in improving quality of life and work productivity. In addition, our health plans provide coverage for the effective management of conditions such as sleep apnea, hypertension, obesity, cardiac diseases, diabetes and pre-diabetes. However, we do not determine essential health benefits. Essential health benefits (EHBs) are determined by federal and state legislators and regulators. We believe, however, that at least several of our health plans' Exchange products will include sleep testing and therapy as EHBs.

We appreciate your outreach to us. While we embrace the opportunity to meet with national organizations that advocate the interests of our participating providers, it seems that our meeting would not be able to further your goal as stated in your letters. If I have misconstrued your purpose of a meeting, please do not hesitate to contact me.

Thank you, again, for your communications.

Sincerely,

A handwritten signature in black ink, appearing to read "Colin" followed by a surname, written over a circular stamp or seal.



151 Farmington Avenue, RC5A  
Hartford, CT 06156

Jeff D. Emerson  
Senior Vice President  
Head of Health Care Management

Samuel A. Fleishman, MD  
President  
American Academy of Sleep Medicine  
2510 North Frontage Road  
Darien, IL 60561

April 30, 2013

Dear Dr. Fleishman:

Thank you for your letter of April 29, 2013 regarding your and the Academy's interest in discussing coverage of sleep medicine services in State Health Insurance Exchange Plans filed by Aetna. Regrettably your letter comes too late as Aetna (and all other insurance companies) filed its Health Insurance Exchange benefit plans and rates today, in accordance with federal and state requirements.

The good news for the American Academy of Sleep Medicine is that Aetna recognizes the value of sleep medicine services and covers such services in accordance with its Clinical Policy Bulletins and benefit plans. The principal Clinical Policy Bulletin for this subject is Bulletin 0004 Obstructive Sleep Apnea in Adults which may be found on the Internet at [http://www.aetna.com/cpb/medical/data/1\\_99/0004.html](http://www.aetna.com/cpb/medical/data/1_99/0004.html).

Please note that coverage of sleep medicine services may vary by benefit plan and venue. But the Clinical Policy Bulletin cited here, as well as its analog for children (and other Clinical Policy Bulletins available online) clearly spell out Aetna's clinical policy on this subject.

Sincerely,

Jeff D. Emerson  
Head of Health Care Management

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**From:** Nolan, Steve

**Sent:** Thursday, May 02, 2013 12:01 PM

**Subject:** re: AASM Letter Regarding the Coverage of Sleep Services in Essential Health Benefits - to Mr. Gordon- Meeting Request

Patrick forwarded your email and attached letter to me, as the more appropriate contact at RMHP for this matter. At this point a meeting is not necessary. Our formularies have adequate coverage for sleep disorders and will continue to have this coverage in 2014. You may refer to our drug formularies on our website, [www. RMHP.org](http://www.RMHP.org).

Thank you

Steve R Nolan, Pharm.D.  
Pharmacy Director



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**From:** Andis, Glenn

**Sent:** Friday, May 03, 2013 9:06 AM

**Subject:** RE: AASM Letter Regarding the Coverage of Sleep Services in Essential Health Benefits – to Mr. Andis– Meeting Request

Thanks for your message. There is no need to meet. Medica will cover sleep services on the exchange and after 1-1-14 in the same manner that we do today—it's covered. Thanks,

Glenn Andis, Senior Vice President  
Medica Government Programs

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**From:** Allan\_Chernov

**Sent:** Monday, April 29, 2013 1:26 PM

**Subject:** Re: AASM Letter Regarding the Coverage of Sleep Services in Essential Health Benefits ? to Dr. Chernov?  
Meeting Request

I am the medical policy medical director (MPMD) for Blue Cross Blue Shield of Texas (BCBSTX), one of the four BCBS Divisions of Health Care Service Corporation (HCSC). HCSC is a Mutual Legal Reserve Company and an independent licensee of the Blue Cross and Blue Shield Association. The other 3 divisions are BCBSIL, BCBSNM and BCBSOK.

HCSC medical policy is an "Enterprise" function and applies to all four state Divisions. We cover a broad range of sleep services as defined in medical policies **MED205.001** (currently being revised) and **SUR706.009**. These coverage positions will apply to "Essential Health Benefits" in our Exchange products.

I believe that the coverage positions in our policies will meet your objectives, so that a meeting is probably unnecessary. Since I imagine that AASM resources are quite stretched by your outreach initiative, one less meeting might be helpful!

I suggest your staff review our policies and let us know where they think HCSC falls short. We will be happy to review this feedback and consider changes. I've attached a Word file with instructions for accessing our medical policies on the Internet:

Thank you.

Allan J. Chernov, MD  
Medical Director, Medical Policy & Quality  
1001 E. Lookout Drive, Richardson, TX 75082, B-10.408  
Office: 972-766-1149 Fax: 972-766-5559 Cell: 214-536-4700

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Thank you for your communication with Dr. Popiel regarding sleep services coverage as EHBs. Regence has had some input into the state level EHB processes. Most have already been finalized. We have long considered sleep services as basic medical services (sleep studies, CPAP, BiPAP, etc.) We have no reason to consider these services less essential under ACA than before. Meeting on this issues would not make our position any more supportive than it already is.

Csaba

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**Csaba Mera, MD**

Deputy Chief Medical Officer, Cambia Health Solutions

Executive Medical Director, Regence BCBS of Oregon

Office: 503-276-1853

Mobile: 971-219-6579



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**From:** Robert Wheeler, MD

**Sent:** Thursday, May 02, 2013 1:42 PM

**Subject:** RE: AASM Letter Regarding the Coverage of Sleep Services in Essential Health Benefits – to Dr. Wheeler– Meeting Request

In Vermont, BCBSVT was selected as the base plan for establishing essential health benefits on the Vermont Connector Exchange. As you may know, BCBSVT does provide benefits for sleep testing and for treatment of sleep disorders. I wonder whether your letter might be one that is being sent to health plans across the country. The situation elsewhere may be different than in Vermont.

Our recently revised medical policy based on BCBSA TEC evaluation is posted on our website and scheduled to be effective 6/1/2013.

<http://www.bcbsvt.com/provider/eligibility/MedicalPolicies.html>

[http://www.bcbsvt.com/export/sites/BCBSVT/provider/medicalpolicies/PDFs/Sleep Disorders Diagnosis and Treatment 2013 Publication Copy.pdf](http://www.bcbsvt.com/export/sites/BCBSVT/provider/medicalpolicies/PDFs/Sleep_Disorders_Diagnosis_and_Treatment_2013_Publication_Copy.pdf)

We are scheduling a meeting this month with sleep doctors from our participating provider panel for more detailed input on this policy. Feedback so far has been generally favorable, with at least one expert noticing that our review criteria align reasonably well with national professional society standards. We anticipate discussing alternatives to use of the Epworth scale as well as appropriate outcome metrics.

If you have particular concerns about BCBSVT benefits in products that will be available on the Vermont exchange, please let me know.

Thanks,

Robert Wheeler, M.D.

Vice President and Chief Medical Officer BCBSVT

(802) 371-3716