



# American Academy of Sleep Medicine

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Karla A. Austen  
Executive Vice President, Networks Management  
MVP Health Care  
625 Sate Street, PO Box 2207  
Schenectady, NY 12301-2207

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Jerome A. Barrett  
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Dear Ms. Austen,

On behalf of the American Academy of Sleep Medicine (AASM), I am writing to express concerns about the implementation of MVP's Sleep Study Benefit program. As the leader in setting standards and promoting excellence in sleep medicine health care, the AASM represents a membership of 10,000 physicians, scientists, and other health professionals in the medical subspecialty of sleep medicine.

The AASM recognizes that sweeping changes in the U.S. health care system are forcing insurers to develop strategies to contain costs and improve efficiency. In response to this systemic pressure, MVP made the decision to begin requiring precertification for sleep testing in the fall of 2012. To facilitate this process, MVP contracted with Sleep Management Solutions (SMS) to provide health benefits management services. Additionally, according to a July 2012 bulletin, MVP announced that SMS would serve as "MVP's solely-contracted provider of in-network home sleep testing."<sup>1</sup> Following the implementation of the new Sleep Study Benefit program, MVP contracted with a number of local providers in addition to SMS to offer testing services. While we commend MVP for beginning to include local providers of care, the AASM is still concerned that the manner in which the Sleep Study Benefit program has been implemented is denying appropriate sleep testing and diminishing the quality of care for some MVP beneficiaries with a sleep illness.

Anecdotal reports from AASM members suggest that MVP is continuing to rely on SMS as the preferred provider of out of center sleep testing (OCST) despite access to quality local testing providers. MVP's updated Obstructive Sleep Apnea Diagnosis Medical Policy (effective date June 1, 2013) indicates "only a specifically contracted vendor or provider for home polysomnography will be allowed to perform home sleep studies." The AASM recommends that MVP rely on AASM accredited local OCST providers for these services. The AASM standards for accreditation ensure that sleep centers maintain proficiency in areas such as testing procedures and policies, patient safety and follow-up, and physician and staff training. The AASM accredited the first sleep center in 1977, and today there are more than 2,500 AASM accredited sleep centers across the U.S. More than 1,000 facilities also have earned AASM accreditation for OCST in adult patients.

The MVP Obstructive Sleep Apnea Diagnosis Medical Policy was recently updated with an effective date of June 1, 2013. A number of important changes have been made to the policy to improve its concordance with AASM guidelines. We applaud MVP for updating its list of co-morbid conditions which support necessity of in-center polysomnography. Requiring in-center polysomnography for patients

<sup>1</sup> MVP Health Care. Sleep Study Benefit Interpretation Update: July 17, 2012. Available from [www.mvphealthcare.com](http://www.mvphealthcare.com).

suspected of sleep disorders other than obstructive sleep apnea is particularly noteworthy as it brings the MVP closer to agreement with AASM clinical guidelines. The revised policy also begins to address one of the AASM's most significant concerns; our concern about the absence of physician credentialing requirements in sleep medicine.

An over-arching concern regarding the MVP Sleep Study Benefit program is the absence of criteria requiring that sleep medicine services be provided by board certified sleep medicine physicians and the team of health care professionals at AASM accredited sleep centers. The updated MVP medical policy, effective June 2013, notes in the indications/criteria section that, "A consultation for a sleep study by a sleep medicine specialist (Boarded Sleep Specialist) may be appropriate." The complexity of sleep disorders, including their common co-occurrence and their frequent interaction with comorbid medical conditions, requires the clinical expertise of a sleep medicine physician who can make an accurate diagnosis and provide effective treatment. Sleep specialists undergo formal education through fellowship training programs that are accredited by the Accreditation Council for Graduate Medical Education (ACGME).

Recognizing that sleep medicine requires additional expertise, the American Board of Internal Medicine (ABIM) administers a subspecialty examination in sleep medicine that is offered by six member boards of the American Board of Medical Specialties (ABMS). This training and certification uniquely qualifies board certified sleep medicine physicians to provide high quality, coordinated and cost-effective diagnostic and therapeutic services for sleep-related problems.

The AASM argues that a stronger statement by MVP, delineating a requirement that all sleep tests be interpreted by a board certified sleep specialist, is necessary to ensure that quality care is provided to MVP covered lives. The expertise of board certified sleep medicine physicians is especially important when interpreting the limited data gathered by OCST. As stated in the AASM clinical guideline for OSA, "Clinical sleep evaluations using PM (portable monitoring) must be supervised by a practitioner with board certification in sleep medicine or an individual who fulfills the eligibility criteria for the sleep medicine certification examination" and "Testing should be performed under the auspices of an AASM accredited comprehensive sleep medicine program with policies and procedures for sensor application, scoring, and interpretation of PM."<sup>1</sup>

The AASM agrees with MVP that patients with a sleep illness should receive quality, cost-effective, and safe care throughout the course of treatment, and we would appreciate the opportunity to work with you in pursuit of this goal. Please contact AASM Executive Director Jerome Barrett at (630) 737-9700 to discuss in more detail the stated concerns about MVP's Sleep Study Benefit program.

Sincerely,

Sam Fleishman, MD  
President

cc: Jerome A Barrett, AASM Executive Director

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<sup>1</sup> Epstein LJ, Kristo D, Strollo PJ Jr, et al. Adult Obstructive Sleep Apnea Task Force of the American Academy of Sleep Medicine. Clinical guideline for the evaluation, management and long-term care of obstructive sleep apnea in adults. J Clin Sleep Med. 2009 Jun 15;5(3):263-76.