



Home Sleep Apnea Testing and Sleep Time Guide

DISCLAIMER

This document contains information on codes that are potentially applicable in the use of our products. It is intended to compile publicly available information that may be useful to you for your convenience. We strongly suggest that you consult your Medicare contractor or payer organization with regard to local reimbursement policies.

The information contained in this document is provided for information purposes only and represents no statement, promise or guarantee by EnsoData concerning levels of reimbursement, payment or charge.

Similarly, all CPT® and HCPCS codes are supplied for information purposes only and represent no statement, promise or guarantee by EnsoData that these codes will be appropriate or that reimbursement will be made.

Frequently Asked Questions

Question:

What is the difference between CPT 95800, 95801 and 95806?

Answer:

- 95800 includes sleep time and 95801 and 95806 do not
- 95800 and 95801 include recording of respiratory analysis, by airflow or peripheral arterial tone
- 95806 does not include recording respiratory analysis using peripheral arterial tone
- 95806 requires recording of respiratory effort

Excerpted from CMS Local Coverage Article: Billing and Coding: Polysomnography (A56995) ¹

Code	Description
95800	Sleep study, unattended, simultaneous recording; heart rate, oxygen saturation, respiratory analysis (eg. by airflow or peripheral arterial tone), and sleep time
95801	Sleep study, unattended, simultaneous recording; minimum of heart rate, oxygen saturation, and respiratory analysis (eg. by airflow or peripheral arterial)
95806	Sleep study, unattended, simultaneous recording of; heart rate, oxygen saturation, respiratory airflow, respiratory effort (eg. thoracoabdominal movement)
G0398	Home sleep test (HST) with Type II portable monitor, unattended; minimum of 7 channels: EEG, EOG, EMG, ECG / heart rate, airflow, respiratory effort and oxygen saturation
G0399	Home sleep test (HST) with Type III portable monitor, unattended; minimum of 4 channels: 2 respiratory movement / airflow, 1 ECG / heart rate, and 1 oxygen saturation
G0400	Home sleep test (HST) with Type IV portable monitor, unattended; minimum of 3 channels

Question:

Does code 95800 apply when the sleep time resulting from EnsoData’s Total Sleep Time analysis (EnsoTST) is included in the HSAT report sent to the physician for interpretation?

Answer:

CPT® & HCPCS code requirements vary by payer for unattended home sleep studies. Check with your payer to ensure appropriate coding on your claim form.

EnsoTST analysis is applied to the PPG signal generated by many HSAT devices to detect whether the patient is asleep or awake on an epoch-by-epoch basis. A total sleep time is then calculated based on the number of epochs that are detected as “sleep” and can be included in the sleep study report when sent to physicians for interpretation.

On Dec. 1, 2020, the Centers for Medicare & Medicaid Services (CMS) released the final rule that includes final changes to the 2021 Medicare Physician Fee Schedule (PFS).

Medicare Physician Fee Schedule Payments ^{1,2}

CPT® ³	Modifier	Description	2020 Avg National Payment ¹	2021 Avg National Payment ¹	2021 RVUs ²
95800	Global	Sleep study, unattended, simultaneous recording; heart rate, oxygen saturation, respiratory analysis (e.g., by airflow or peripheral arterial tone), and sleep time	\$168.90	\$170.28	4.88
	TC	Technical Component	\$126.31	\$128.41	3.68
	26	Professional Component	\$42.59	\$41.87	1.20
95806	Global	Sleep study, unattended, simultaneous recording of, heart rate, oxygen saturation, respiratory airflow, and respiratory effort (e.g., thoracoabdominal movement)	\$119.10	\$102.59	2.94
	TC	Technical Component	\$72.90	\$57.22	1.64
	26	Professional Component	\$46.19	\$45.36	1.30
HCPCS ³					
G0399	N/A	Home sleep test (HST) with type III portable monitor, unattended; minimum of 4 channels: 2 respiratory movement /airflow, 1 ecg / heart rate and 1 oxygen saturation	Carrier Determined	Carrier Determined	N/A
G0400	N/A	Home sleep test (HST) with type IV portable monitor, unattended; minimum of 3 channels	Carrier Determined	Carrier Determined	N/A

CPT®/HCPCS code requirements may vary by payer for unattended home sleep studies. Check with your payer to ensure appropriate coding on your claim form.

CPT® Modifiers are often used with diagnostic studies that may have separate billing components; a professional and technical service. In some instances, the provider can bill both the professional and technical component as a global service. Contact your Medicare contractor or other payer to determine if you meet their requirements for billing globally.

- Technical Component (TC): The technical component (TC) represents the cost of the equipment, supplies and personnel to perform the procedure.
- Professional Component (26): The professional component (PC) represents the supervision and interpretation of a procedure provided by the physician or other healthcare professional.

Additional Resources

[AASM Coding and Reimbursement](#)

- [AASM Coding FAQs](#)
- [AMA CPT and RUC](#)

[When do I use G codes to code for Home Sleep Apnea Testing? \(via Sleep Review\)](#)

References

1. [CMS Local Coverage Article: Billing and Coding: Polysomnography \(A56995\)](#) located on cms.gov
2. [AASM 2021 Sleep Medicine RVU and Payment Comparison](#) located on aasm.org
3. Calendar Year 2021 Medicare Physician Fee Schedule, Final Rule [CMS-1734-F]. Federal Register, December 02, 2020. No geographic adjustments have been made to the reported payment rates. All MPFS Fee Schedules calculated using CF of \$34.8931 effective January 2021
4. Current Procedural Terminology (CPT®) copyright (2020). American Medical Association (AMA). All rights reserved. No fee schedules, basic units, relative value or related listings are included in CPT®. The AMA assumes no liability for the data contained herein.

Contact sales@ensodata.com to learn more about EnsoSleep and EnsoTST.