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CPAP/BiPAP Supply Transfer Patient Checklist

We appreciate your interest in transferring to Mitchell Home Medical for your supply and care needs.

Welcome to our Compassion, Care, Always There approach.

Insurance regulations require home medical equipment supplies to have specific medical documentation in-hand prior to dispensing equipment. We require these documents in order to begin your transition to MHM. If you are transferring to us from another provider, your previous provider may already have these documents. If not, you will need to obtain them from the physician who ordered the equipment for you.

We are providing this Checklist in an effort to help you comply with your insurance's complex requirements. It is our goal to help ensure your insurance coverage of your equipment and supplies.

You may have all of the required documentation faxed to us or hand deliver them to us. Please call us with any questions. If you are unable to provide the required paperwork outlined in this Checklist, it may be necessary for you to obtain new documentation.

Obtaining new documentation begins by visiting your Physician.

REQUIRED DOCUMENT CHECKLIST:

New Order (Prescription) from Physician

Doctor Notes - From most recent appointment regarding PAP Equipment

Insurance rules require that Commercial Insurances customers see their physician within 12 months, Medicare customers require an appointment within the past 6 months. The progress note from your physician must document the medical history of your sleep disorder, agree that you are compliant with your existing PAP equipment, and show that the physician recommends continued use is medically necessary.

****Medicare Beneficiaries: Evaluation must occur after your Medicare effective date.**

Compliance Documentation - Owned/Rented Machine more than Three Months

CPAP/BiPAP Usage Download

Copy of download showing a 30 day span of use, indicating 70% of the time the device was used 4 hours or more per night. This must be within the first 90 days after the initiation date of PAP.

Doctor Notes - From 31 - 90 Day PAP Follow-Up Appointment

Face-to-face re-evaluation completed by the physician between 31 - 91 days from the initial setup by the previous provider, documenting the patient usage and benefit from CPAP/BiPAP.

Respiratory Assist Devices - require follow-up between 61 - 90 days of the initial setup date.

Qualifying Test Results

Doctor Notes - From Appointment where Sleep Study was ordered

The evaluation must document your signs/symptoms of obstructive sleep apnea, the need for sleep study, and be conducted prior to your sleep study. The progress notes must be signed and dated.

Diagnostic Sleep Study

A baseline sleep study may be a Polysomnogram (PSG), Split-Night, or Home Sleep Test. The test must be legible, signed and dated by the interpreting physician or other qualified healthcare professional.

****Medicare Beneficiaries:** This sleep study must meet guidelines in effect at the time you request Medicare's payment for your equipment. Medicare's guidelines changed in 2014. If your study was before the 2014 change you may require a new sleep test.

Equipment & Supply Information - Must be Documented from Previous Provider

Previous Provider Name: _____ Date Received: _____

Insurance who paid for Machine: _____

Make and Model of Machine: _____ Transfer of Ownership Letter: _____

Serial Number: _____

Request previous supplier release serial number from online tracking

Model & Size of Mask: _____ Tubing Type: _____

Please indicate all supplies received from previous provider in last 6 months:

(INCLUDE DATE(s) OF SERVICE AND HPCS CODE)

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