

## **Actigraphy Reimbursement:**

*Category 1 (CPT) Code 95803 has been approved for the use of actigraphy.*

**Code 95803 Description:** Actigraph testing, recording, analysis, interpretation, and report (a minimum of 72 hours to 14 consecutive days of recording, requires a patient to wear a home monitor for 24 hours a day for 3 to 14 days)

- Actigraphy (95803) was released under Contract Carrier Pricing; therefore, coverage guidelines have not yet been issued by the Centers for Medicare and Medicaid Services (CMS) and current coverage/reimbursement varies by jurisdiction.
- All CMS sleep related codes have been under review (including actigraphy) since early 2010. We are hopeful and it is anticipated that a revised reimbursement schedule will be released in late fall with coverage guidelines commencing in January of 2011.
- Claims for other ancillary services, such as Evaluation and Management (E&M) or replacement supplies and professional/technical components **may** be eligible for reimbursement in addition to the actigraphy service, but it is not completely certain at this time.
- Documentation of patient sleep complaints may be requested by payers to verify the medical necessity of actigraphy testing. Actigraphy may be useful for the evaluation of conditions such as insomnia/hypersomnia, daytime sleepiness, periodic leg movement disorder, and CPAP compliance.
- Many have found it helpful to verify payer policy and coverage requirements prior to providing actigraphy services. However, utilizing the appeals process post a rejection for reimbursement, has also been reported with moderate success.

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