



American Academy of Sleep Medicine

Dear Oklahoma Health Care Authority Board Members,

On behalf of the board of directors of the American Academy of Sleep Medicine (AASM), I am writing to the Oklahoma Health Care Authority to express our concern related to the Authority's recent rulings:

- WF # 15-04 – [Sleep Studies Elimination](#); and
- WF # 15-06 – [CPAP Elimination for Adults](#).

Such rulings could lead to devastating health complications for all Oklahoman adults in need of sleep care, particularly the Medicaid beneficiaries who suffer from untreated sleep apnea.

CPAP is the most effective therapy for obstructive sleep apnea (OSA), which is a chronic disease that affects an estimated 25 million Americans. If left untreated, OSA severely increases the risk of developing serious comorbid diseases such as heart disease, stroke, hypertension, type 2 diabetes, and depression.

Two demographic groups affected by OSA include the obese and elderly populations. Oklahoma now has the seventh highest adult obesity rate in the nation, according to *The State of Obesity: Better Policies for a Healthier America*. Oklahoma's adult obesity rate is 32.5 percent, up from 24.1 percent in 2004 and 10.3 percent in 1990. Also, according to 2014 U.S. Census Bureau statistics, 14.3% of Oklahoma's population is elderly (14.1% National average). In addition, according to the Medicaid.gov website, 781,927 Oklahomans are enrolled in the Medicaid or CHIP program. These figures demonstrate that a significant portion of the population will experience a burden in accessing necessary medical care, including diagnostic testing, therapy and long-term management required to treat their disease.

The elimination of sleep coverage for Medicaid patients is in direct contrast to the high standard of care Oklahoma has established for individuals who have a sleep disease. On May 27, 2009, the Oklahoma Sleep Diagnostic Testing Regulation Act was signed into law. Oklahoma is the only state in the nation that has statutory language which requires Oklahoma facilities and physicians to adhere to certain standards, including a requirement that the interpreting and supervising physician is board-certified in sleep medicine. The Act also requires that sleep diagnostic testing facilities be fully or provisionally certified or accredited by the AASM, the Joint Commission, or the Accreditation Commission for Healthcare (ACHC). To eliminate care for Medicaid patients is counterintuitive to the high quality of care standards Oklahoma has recently established.

For these reasons, it is imperative that the Oklahoma Health Care Authority maintain coverage for sleep tests and therapeutic equipment for the Medicaid population.

As Oklahoma is home to 71 board certified sleep physicians and 19 accredited sleep centers, our state has a thriving and capable physician community with the expertise and training necessary to treat our state's untreated sleep diseases. However, in order to provide the coordinated, high quality care that is needed to treat sleep diseases, the Oklahoma Care Authority must not enact regulations that limit our ability to treat our sleep patients.

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I thank you for considering these concerns, and look forward to your response. To discuss this issue in more detail, please contact AASM Executive Director Jerome Barrett at (630) 737-9700.

Sincerely,

Nathaniel F. Watson, MD, MSc
President

cc: Jerome Barrett