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May 4, 2022

Robert McDonough, MD  
Head of Clinical Policy, Research & Development  
Aetna Clinical Policy Unit  
151 Farmington Ave  
Hartford, CT 06156

Sent via email: [robert.mcdonough@aetna.com](mailto:robert.mcdonough@aetna.com)

Dear Dr. McDonough,

I am contacting you on behalf of the American Academy of Sleep Medicine (AASM), a professional medical society that represents over 10,000 sleep medicine clinicians and sleep centers and is dedicated to advancing sleep care and enhancing sleep health to improve lives.

An AASM member recently reached out to express concern that an Aetna computer error automatically assigns the professional component modifier—-26 to all global 95806 (*Sleep study, unattended, simultaneous recording of, heart rate, oxygen saturation, respiratory airflow, and respiratory effort (eg, thoracoabdominal movement)*) diagnostic studies. As a result of this system error, only the professional component of this study is reimbursed. Although Aetna has acknowledged the computer error, our member has been advised that there is no systematic way to correct the error outside of contract negotiations, which would require adding language to the contract specific to the billing of the CPT code 95806. In addition, Aetna's policy states, "*when a physician or other non-facility provider provides laboratory, radiology or diagnostic services outside the office we will consider this as professional services and pay for the professional component whether or not it is billed with Modifier 26.*" This policy should not be applicable to these particular tests, as it defeats the purpose of an unattended study, also called a home sleep apnea test (HSAT). An HSAT is an at-home, unattended medical diagnostic assessment for the detection of sleep apnea and other sleep breathing disorders. Taken together, Aetna's system error and its current policy negatively impact reimbursement for sleep physicians providing global 95806 HSAT services, which include both the professional and technical component.

Therefore, the AASM urges Aetna to rectify this computer error that erroneously assigns the -26 modifier to all studies billed with code 95806, ensuring reimbursement for the technical and professional components. We also strongly urge Aetna to revise the policy language to allow for global billing and adequate reimbursement for these diagnostic tests, which are intended for home use. If you have any questions about this issue or require any additional information, please contact AASM Director of Health Policy, Diedra Gray, at (630) 737-9700 or [dgray@aasm.org](mailto:dgray@aasm.org).

Sincerely,

Raman Malhotra, MD  
*AASM President*