MBS Review Recommendations:   
unattended (level 2) sleep studies

# Date of change 1 November 2018

# Existing service 12250

# New service 12250

## Revised structure

* The new item provides a stronger link between testing and physician management of patients with a high probability for the diagnosis of symptomatic, moderate to severe obstructive sleep apnoea (OSA).
* The new item will be available for patients with ‘uncomplicated’ OSA who do not require a laboratory-based study.

## Patient pathways

* Revised pathways for OSA patients to receive the test are:
* referral directly where the approved assessment tool (administered by the referring practitioner) suggests a high pre-test probability for the diagnosis of symptomatic, moderate to severe OSA; or
* a professional attendance (face-to-face or video conference) with the adult sleep medicine practitioner or consultant respiratory physician to confirm the necessity for the test.

Existing item 12250

Item: Overnight investigation for sleep apnoea.

Indication: Sleep apnoea or suspected sleep apnoea (complicated and uncomplicated patients).

Pre-study requirement: Medical referral and the necessity for the investigation is determined by a qualified adult sleep medicine practitioner prior to the investigation. The necessity or the investigation has been communicated to the referring medical practitioner.

Billing restriction: 1 service per patient in a 12 month period.

MBS Fee: $335.30.

New item 12250 – UNATTENDED SLEEP STUDIES

Item: Overnight diagnostic sleep study to confirm the diagnosis of OSA.

Indication: Suspected OSA (less complex patients).

Pre-study requirement: Medical referral to a qualified adult sleep medicine practitioner or consultant respiratory physician where approved assessment tools indicate a high probability for moderate to severe OSA (using STOP-BANG or OSA-50 or Berlin Questionnaire and an elevated Epworth Sleepiness Scale ≥ 8); or professional attendance (face-to-face or via telehealth) with a qualified adult sleep medicine practitioner or consultant respiratory physician to confirm necessity for test, irrespective of questionnaire results.

Billing restriction: 1 service per patient in a 12 month period.

MBS Fee: $335.30.

## Co-claiming restriction

* The new item will have a restriction in place to prevent billing of 11000 to 11005, 11503, 11700 to 11709, 11713, 12203 on the same occasion of service.