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## REASONABLE AND NECESSARY OXYGEN ITEMS AND EQUIPMENT FOR HOME USE MUST MEET ALL CRITERIA

Initial coverage of home oxygen therapy and oxygen equipment is reasonable and necessary for Groups I and II if all of the following conditions are met.

1. The treating practitioner has ordered and evaluated the results of a qualifying blood gas study performed at the time of need; and,
2. The beneficiary's blood gas study meets the criteria stated below; and,
3. The qualifying blood gas study was performed by a treating practitioner or by a qualified provider or supplier of laboratory services; and,
4. The provision of oxygen and oxygen equipment in the home setting will improve the beneficiary's condition.

Time of need is defined as during the patient's illness when the presumption is that the provision of oxygen will improve the patient's condition in the home setting. For an inpatient hospital patient anticipated to require oxygen upon going home, the time of need would be within 2 days of discharge.

*NOTE: When applicable, the beneficiary's medical record must have documentation that describes any concerns for variations in oxygen measurements that may result from such factors as the patient's age, the patient's skin pigmentation, the altitude level, or a decrease in oxygen carrying capacity.*

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### Group I Criteria

Group I criteria includes any of the following:

1. An arterial PO<sub>2</sub> at or below 55 mm Hg or an arterial oxygen saturation at or below 88 percent taken at rest (awake) while breathing room air; or,
2. An arterial PO<sub>2</sub> at or below 55 mmHg, or an arterial oxygen saturation at or below 88 percent taken during sleep for a beneficiary who demonstrates an arterial PO<sub>2</sub> at or above 56 mmHg, or an arterial oxygen saturation at or above 89 percent while awake. In this instance oxygen and oxygen equipment is only reasonable and necessary during sleep (For a beneficiary with documented Sleep Apnea, they must have the appropriate in-lab PAP titration test), or
3. A decrease in arterial PO<sub>2</sub> more than 10 mm Hg, or a decrease in arterial oxygen saturation more than 5 percent from baseline saturation taken during sleep and associated with symptoms of hypoxemia such as impairment of cognitive processes and nocturnal restlessness or insomnia (not all inclusive). In this instance, oxygen and oxygen equipment is only reasonable and necessary during sleep; or
4. An arterial PO<sub>2</sub> at or below 55 mm Hg or an arterial oxygen saturation at or below 88 percent, taken during exercise for a beneficiary who demonstrates an arterial PO<sub>2</sub> at or above 56 mm Hg or an arterial oxygen

saturation at or above 89 percent during the day while at rest. In this instance, portable oxygen and oxygen equipment is only reasonable and necessary while awake and during exercise.

Initial coverage for beneficiaries meeting Group I criteria is limited to 12 months or the physician-specified length of need, whichever is shorter.

## **Group II criteria**

Group II criteria includes all of the following:

- A. An arterial PO<sub>2</sub> of 56-59 mm Hg or an arterial blood oxygen saturation of 89 percent at rest (awake), during sleep, or during exercise (as described under Group I criteria), and
- B. Any of the following:
  - 1. Dependent edema suggesting congestive heart failure, or
  - 2. Pulmonary hypertension or cor pulmonale, determined by measurement of pulmonary artery pressure, gated blood pool scan, echocardiogram, or "P" pulmonale on EKG (P wave greater than 3 mm in standard leads II, III, or AVF), or
  - 3. Erythrocythemia with a hematocrit greater than 56 percent.

Initial coverage for beneficiaries meeting Group II criteria is limited to 3 months or the physician specified length of need, whichever is shorter.

## **Group III criteria**

Group III criteria includes all of the following:

- 1. Absence of hypoxemia defined in Group I and Group II above; and,
- 2. A medical condition with distinct physiologic, cognitive, and/or functional symptoms documented in high-quality, peer-reviewed literature to be improved by oxygen therapy, such as cluster headaches (not all inclusive).

## **Portable Oxygen Systems**

A portable oxygen system is covered if the beneficiary is mobile within the home and the qualifying blood gas study was performed while at rest (awake) or during exercise. If the only qualifying blood gas study was performed during sleep, portable oxygen will be denied as not reasonable and necessary.

## **Exercise Testing**

When oxygen is covered based on an oximetry study obtained during exercise, there must be documentation of three (3) oximetry studies in the beneficiary's medical record. (1) Testing at rest without oxygen, (2) testing during exercise without oxygen, and (3) testing during exercise with oxygen applied (to demonstrate the improvement of the hypoxemia) are required. All 3 tests must be performed within the same testing session.

<https://med.noridianmedicare.com/documents/2230703/7218263/Oxygen+and+Oxygen+Equipment+LCD+and+P+A/7f6a39d8-0342-4478-b1f5-1dd4839ef366>