Update in Sleep Medicine

Katie Sarmiento
VA San Diego Healthcare System
May 15, 2016
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<table>
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<tr>
<th>Sleep Service Provided</th>
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<tr>
<td>Home Sleep Testing</td>
<td>65%</td>
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<tr>
<td>Polysomnography</td>
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<td>Telemedicine</td>
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<td>Shared Appointments</td>
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<td>Group Testing</td>
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Sleep Stop Codes

• Stop Codes designate the type of service being provided and the provider type associated with that service.
• Basis for workload tracking in VA
• VA Workload ≠ Physician Workload
• Physician workload is captured through CPT codes
Wireless PAP Monitoring

• PAP technology has improved, allowing remote monitoring of PAP compliance and efficacy

• Data is transmitted daily from PAP units to manufacturer servers via cell towers.

• PAP management programs are cloud-based in the private sector (standard of care) and local drive or local server based in the VA.
Current Challenges

• Access to Sleep Care is limited
  – No way to know compliance and effectiveness until patient is seen in clinic (and patient must bring PAP)

• Patients who are not doing well on PAP are often lost to follow up (no-show or cancel appts)
  – Decreased clinic utilization rates
  – OSA is untreated (and adverse health risks persist)

• Clinic efficiency is impaired by current PAP data management processes
  – Time to download smartcard data is lengthy
  – Databases frequently migrated and inaccessible
Solution

Manufacturer’s Server

VA Sleep Clinic sets up your account

PAP treatment at home

VA Sleep Provider can see your PAP use

https://vendor.com
Wireless Approval Process

• Data Ownership: Patient-owned, Vendor-owned
  – Privacy Office Determination May 2015
• Informed Decision to use wireless (patients)
  – National Ethics Determination March 2015
• Accessing data and security requirements reviewed
  – HISD, national ISO
• Use of PII on Vendor’s servers reviewed by Business Associate Program
  – Shared data for treatment purposes, no BAA required for care purposes
Veteran & Provider Benefits

• Enables Sleep Teleheath Programs
  – Identified by reviewing “real time” data daily, weekly, monthly
• Identify non-compliance and intervene early
• Ability to adjust CPAP settings remotely in lieu of face-to-face visit
• Reduced Veteran Travel
  – Remote geographic areas, CBOCs, VAMCs with limited parking
• Distributive workload
• Enables other models of care: REVAMP web-based platform for OSA management (VACI), Primary care PACT teams, shared medical appointments, telephone clinics
VA National Accounts

Organization

Offices

Administrators

Users

Lead Administrator
Access to all Offices

VA National Account
(Vendor Server)

Portland
San Diego
Philadelphia
Gainesville

VA Sleep Providers & DME Staff
Access to Local Office Only
Wireless Summary

• Use of Wireless PAP monitoring improves care
• Data security is very important
  – Data is patient owned
  – Vendors agree to share this data with providers for care purposes
  – Always accessed through https://PAPcompany.com
  – No data stored on VA servers (except REVAMP)
• FSS Bulletin on General Wireless forthcoming
Inspire Hypoglossal Nerve Stimulation

• Under consideration
• Care coordination
  – Pre-evaluation for eligibility
  – Implantation
  – Post-implantation titrations
• Will require preauthorization through Prosthetics
PAP Procurement/Distribution

- PAP Integrated Product Team
- Denver Acquisition and Logistics Center
Summary

• More guidance on stop code implementation
• Wireless monitoring of PAP therapy is approved
  – Consider VA National Accounts
• 2016 Inventory
• Information on Sleep available through VAPulse Sleep Space (www.vapulse.net)
• VA Sleep Provider meeting in Denver, CO June 12, 2016
• kfsarmiento@ucsd.edu