



# News Release

**American Academy of Otolaryngology—Head and Neck Surgery**

*Working for the Best Ear, Nose, and Throat Care*

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For Immediate Release:

December 19, 2007

**AAO-HNS Applauds CMS Decision to Allow Home Sleep Testing**  
*Patients Now Have a Choice in Sleep Diagnosis and Treatment*

Alexandria, Va. – The American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS) applauds the decision by the Centers for Medicare & Medicaid Services (CMS) to update the current national coverage determination regarding the diagnosis and treatment of obstructive sleep apnea (OSA) and allow home testing with Type II, III, and IV home sleep devices.

This decision will make it easier for patients to receive high quality diagnostic testing and treatment for sleep disorders by allowing them to begin the diagnosis process in the comfort and convenience of their homes.

In addition to allowing testing with Type II, III, and IV devices, CMS will allow a 12-week trial of continuous positive airway pressure (CPAP) for anyone suspected of having OSA.

“This is a great victory for patients who may suffer from OSA and the numerous medical issues caused by sleep apnea,” said Academy spokesman Eric Mair, MD, who testified before CMS in support of changing the national coverage determination. “Because home testing will now be an option, scores of patients who may have otherwise gone undiagnosed will be able to seek the best treatment for OSA, and hopefully see an improvement in their quality of life. With this change, CMS has taken a bold step forward to overcome the limitations of the current system and ensure patients nationwide have access to the best care available.”

Obstructive sleep apnea is a pervasive, profoundly dangerous, debilitating, and largely under-diagnosed disease. In the United States alone, it is estimated that many as 24 percent of men and 9 percent of women suffer from the disorder, increasing their risk of auto accidents, stroke, heart failure, and death, while resulting in a lower quality of life and less productive workplace experience. Furthermore, it is estimated that 75 to 80 percent of all cases of OSA that could benefit from treatment remain undiagnosed.

Under the previous system, patient diagnostic testing was hindered by a policy that limited coverage to facility-based polysomnography testing in a sleep laboratory. That system created access problems for some patients due to a high level of demand, a lack of sleep laboratories in some areas, and apprehension among patients who are uncomfortable with testing in a lab.

CMS is now soliciting public comment on these changes via their website until January 13, 2008:

<http://www.cms.hhs.gov/mcd/viewtrackingsheet.asp?id=204>

Reporters who wish to speak with an ENT expert on sleep disorders can contact Matt Daigle at 703-519-1563, or at [newsroom@entnet.org](mailto:newsroom@entnet.org).

***About the AAO-HNS***

*The American Academy of Otolaryngology – Head and Neck Surgery ([www.entnet.org](http://www.entnet.org)), one of the oldest medical associations in the nation, represents more than 12,000 physicians and allied health professionals who specialize in the diagnosis and treatment of disorders of the ears, nose, throat, and related structures of the head and neck. The Academy serves its members by facilitating the advancement of the science and art of medicine related to otolaryngology and by representing the specialty in governmental and socioeconomic issues. The organization’s mission: “Working for the Best Ear, Nose, and Throat Care.”*

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