Paediatric CPAP Funding Criteria

The funding criteria have been developed in consultation with expert clinicians and specify clinical criteria for CPAP, provide a basis for consistent and transparent decision making, and assist with safe and appropriate distribution of equipment. The funding criteria do not replace the need for local clinical service guidelines or prescriber clinical reasoning, and recognise that not all items that are clinically recommended will meet the criteria for funding through EnableNSW.

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Part A: CPAP CLINICAL FUNDING CRITERIA

This funding criteria refers to infants, children and young people up to 18 years of age, with a demonstrated need for long term CPAP therapy in the community.

Eligible Prescribers	Inclusions	Exclusions
• Paediatric Respiratory physician • Paediatric Sleep physician	• Fixed pressure CPAP machine (pressure range 4-20 cmH_2O) with in-built modem and integrated humidifier OR • Weight and age-appropriate positive airway pressure device (as per manufacturer's intended use) in fixed pressure CPAP mode *EnableNSW is required to purchase the most suitable and cost effective fixed CPAP devices from the NSW Government Contract HC18_1802.*	• Auto-titrating CPAP equipment • Circuit/tubing/connectors • Masks/interfaces & chinstraps • Filters (including antibacterial/antiviral filters) • Batteries and car adaptors • Oral appliances

Step 1. Initial screening: adenoidectomy/ tonsillectomy

Has an adenoidectomy/ tonsillectomy been indicated for the child?

Prescriber must assess the following: **AND**	**No** Proceed to Step 2	**Yes** Has the diagnostic study been performed once the child has stabilised post adenoidectomy/tonsillectomy?	
		Yes Proceed to Step 2	**No** Repeat diagnostic sleep study is required post-surgery

Step 2. Diagnostic information

Prescriber must provide one of the following: **AND**	Full technical and physician reports demonstrating ONE of the following (1 – 3): **1**. Diagnostic polysomnography (PSG) or limited channel study (as per Part B) demonstrating total Obstructive Apnoea Hypopnea Index (OAHI) ≥ 15/hr **OR** **2.** Diagnostic PSG or limited channel study (see Part B) demonstrating total OAHI ≥ 10/hr AND a. minimum oxygen desaturation ≤ 85% OR b. CO_2 retention ≥ 8 mmHg OR c. $TcCO_2$ > 50mm Hg for 25% of the sleep study OR d. documented evidence of significant cardiorespiratory co-morbidities (evidence in letter- refer to Part B) **OR** **3.** Persisting OSA (OAHI ≥ 5/hr) post adenoidectomy/tonsillectomy on diagnostic PSG or limited channel study (see Part B) AND a. minimum oxygen desaturation ≤ 85% OR b. CO_2 retention ≥ 8 mmHg OR c. $TcCO_2$ > 50mm Hg for 25% of the sleep study OR d. documented evidence of significant cardiorespiratory co-morbidities (evidence in letter- refer to Part B)

Step 3. CPAP treatment information	
Prescriber must provide one of the following: **AND**	Full technical and physician report of a CPAP pressure determination PSG demonstrating control of sleep disordered breathing at the determined pressure
Step 4. Home trial & compliance download	
Prescriber must provide: **AND**	Downloaded compliance report from a trial of fixed pressure CPAP at home for at least two (2) consecutive weeks within in the previous four (4) months, demonstrating consistent usage of ≥ 4 hours per night for ≥ 70% of nights
Step 5. Clinical letter	
Prescriber must provide:	Recent letter from Respiratory/Sleep Physician confirming that the child or young person is clinically stable on long-term CPAP, and who will be responsible for ongoing clinical review of the person.

PART B: ADDITIONAL INFORMATION

1. Information and requirements for all PSG and limited channel studies	**All PSG and limited channel studies:** • Full technical reports **AND** physician reports must be submitted • EnableNSW will accept OAHI scored using a 3% SpO_2 desaturation threshold **Limited channel and home based diagnostic studies:** • Limited channel diagnostic studies submitted to EnableNSW must include as a minimum SpO_2 and respiratory band (plethysmography) measurements • Where possible, efforts should be made to measure airflow and $TcCO_2$
2. Requirement for recent treatment and follow-up information	• CPAP treatment PSG studies and other clinical documents submitted must be ≤ 2 years old • For children established on CPAP therapy more than 2 years ago: - Repeat diagnostic sleep studies are not required unless there has been a change in the child's respiratory/sleep condition since original establishment onto CPAP (e.g. adenoidectomy/tonsillectomy) or if clinically indicated • Compliance and follow up clinical letter must be recent as per the criteria in Part A
3. Providing evidence of significant cardiorespiratory co-morbidities	• To be eligible for CPAP equipment as per Part A Diagnostic criteria 2 or 3, prescribers may be required to provide documentation of any significant cardiorespiratory co-morbidities present which could be associated with worse health outcomes if OSA was not treated • The prescriber must specify any such cardiorespiratory co-morbidities in a clinical letter as part of the CPAP equipment request

4. Compliance downloads in children under the age of two (2) years	• It has been reported that in children under the age of two (2) years, CPAP machines may not consistently detect breaths, resulting in compliance data not reflecting actual usage. In these situations, the prescriber/clinical team must explain the discrepancy between recorded and actual CPAP usage, and provide a subjective estimate of usage in the cover letter.
5. Complete settings are required to set the CPAP machine	• Complete settings are required in order to avoid delays in your patient's CPAP machine being set up and delivered. • As a minimum, please provide: fixed CPAP pressure • Other settings (if required) may include: ramp time, ramp start pressure, EPR/C-flex settings
6. Age and weight considerations for device selection for CPAP	The technical working group of expert clinicians acknowledged that small infants and children can be managed safely at home on standard CPAP machines even if they are not within the manufacturer's intended use for the child's weight and age. If the prescriber is requesting funding for a standard CPAP device outside of the manufacturer's intended use for weight and age, the prescriber must provide a supporting letter acknowledging that they have individually assessed the patient and considered the suitability and safety of a standard CPAP machine, and that this has been discussed with and consented by the child's family/guardian. **OR** A weight and age-appropriate positive airway pressure device (as per manufacturer's intended use) for use in fixed pressure CPAP mode can be requested
7. CPAP device brand and model selection	The Equipment Request Form allows prescribers to select the device brand and model (must be on contract). Please select a device that the child and their family/carers are familiar with and know how to use. Please contact EnableNSW for information regarding NSW government contract devices.
8. Equipment allocation	Available equipment that meets the child's assessed requirements may be either reallocated or new
9. Availability of new CPAP models, modes or features	EnableNSW will not exchange functioning CPAP or integrated humidifier equipment on the basis of newer device models, modes, or new or updated features becoming available
10. Ongoing clinical review, ongoing contact requirements, obtaining settings for repairs	• In line with clinical best practice guidelines, EnableNSW expects that people using EnableNSW CPAP devices have ongoing regular review with their respiratory/sleep physician to ensure they continue to be on the optimal treatment • As the prescriber of this equipment, the respiratory/sleep physician agrees to: - Provide current contact details, and alternative contact details for clarification of clinical information or other CPAP equipment updates for the child and their family - Provide up to date CPAP device settings to EnableNSW Repairs & Maintenance Team on request, which are required for repairs to be initiated

11. It is the responsibility of the prescribing physician/clinical teams to submit/organise and ensure the following:	Training, safety, and repairs: • The child and family/carers are trained and are capable of using the equipment safely and appropriately, including basic equipment care and minor troubleshooting • The child and family/carers are trained how to regularly clean and inspect the CPAP equipment, and safely store and transport the equipment (e.g. empty the humidifier chamber before transporting the machine) • The child/primary carer should retain a copy of current CPAP prescription settings • The child and family/carers should work with the prescribing physician to ensure that they comply with device usage, and must be informed that therapy compliance data will be recorded by the clinical service • If the child is not using the provided CPAP device as prescribed, the physician or clinical service should review and provide assistance to the child and family/carers • Provide the child and family/carers with information about their treatment plan, ongoing clinical review and assessment requirements in relation to their CPAP treatment • EnableNSW can be contacted to coordinate repairs and/or replacement within business hours (9am-5pm, Monday to Friday). EnableNSW and contracted equipment suppliers do not provide a 24 hour equipment support contact line. • The child and family/carers must be aware of the procedure to follow in the event of CPAP equipment failure, and have a plan in place for CPAP equipment failure outside of business hours. The child and family/carers must have contact details for their clinical team. Any concerns about the child's CPAP management or health condition must be discussed with the clinical team. Equipment and environment factors: • Ensure the CPAP equipment prescribed is compatible with the child's home environment and all other equipment or consumables prescribed, and is suitable for safe management of the child in the community • Ensure that the child's place of residence has access to a stable electrical power source that is sufficient for device operation • The clinical team must notify EnableNSW if the equipment is no longer required • A NSW Government Planning & Environment Electricity Rebate Form is completed: https://www.service.nsw.gov.au/transaction/apply-life-support-energy-rebate-retail-customers