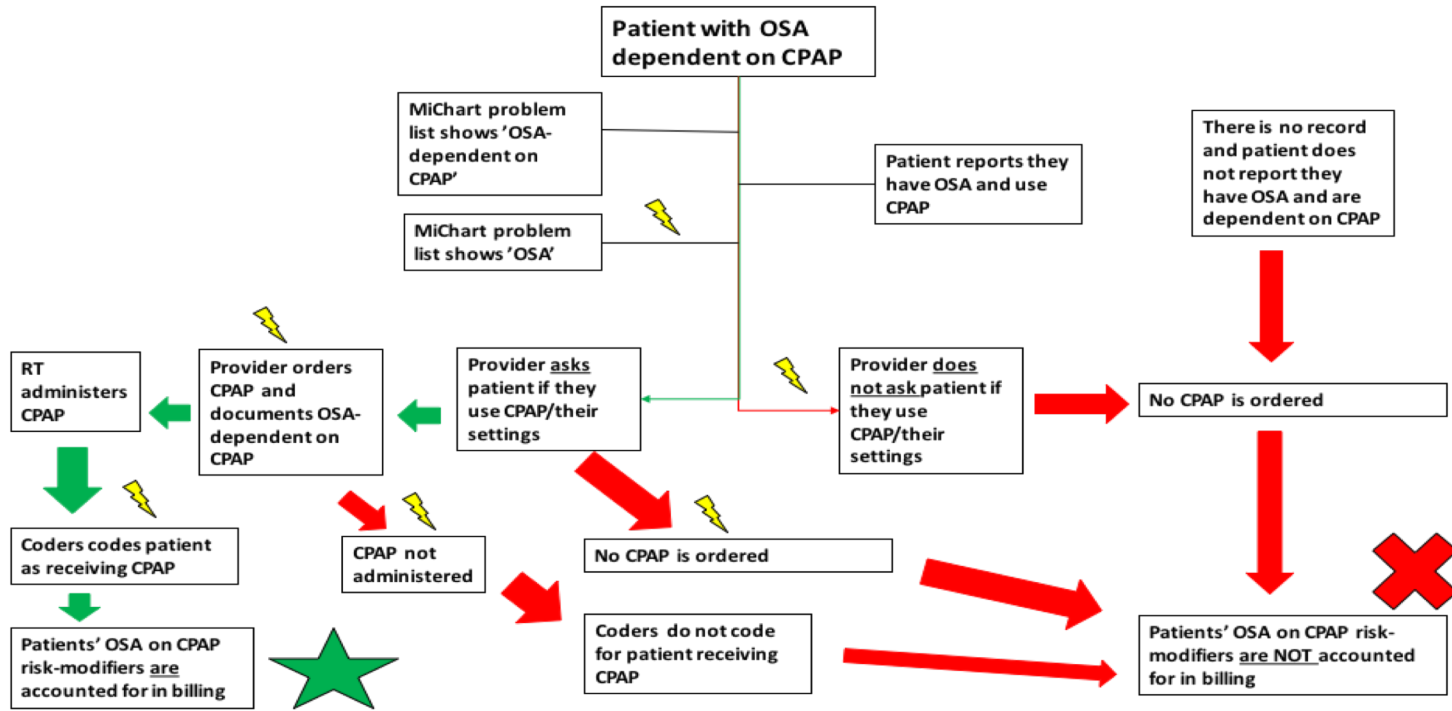|	
Date: **3/6/2018**	Owner: **Morgan White**
Approval Date:	Manager Approval:

BACKGROUND/PROBLEM
Michigan Medicine codes OSA on CPAP at *** less frequency than our peer institutions and thus our patients with OSA who receive CPAP during their hospital stay are reflected as "less sick" so we receive less compensation than our peer institutions.

CURRENT CONDITIONS

GOAL
- **Providers:** 1) Will update OSA diagnosis 2) Will ask their OSA patients if and how they use CPAP 3) Will order CPAP 4) Will document OSA status in chronic conditions
- **Respiratory Therapists:** Will always document why CPAP was not given
- **Coders:** Will code OSA-dependent on CPAP

ANALYSIS | **We do not appropriately code patients with OSA on CPAP**

WHY 1?	Coders are not allowed to bill CPAP	Providers do not order CPAP because they find process cumbersome	CPAP is not administered	CPAP order set doesn't optimize appropriate coding
WHY 2?	There is a policy that forbids coders from billing CPAP	CPAP order requires info the provider might not know	We don't know	No required diagnosis for QHS CPAP order
WHY 3?	***	Patient doesn't know/Provider didn't ask	Not all RTs indicate why device is not in use	We haven't built in that function
WHY 4?		No policy/No standard practice	There is no standard policy	

PROPOSAL

PLAN

FOLLOW-UP