

# Demonstrating IMPACT in Action With **dreem**

## THE BACKGROUND

- » An estimated **1B people** suffer from obstructive sleep apnea (OSA), and exponentially more have insomnia, both of which cause poor downstream health outcomes.
- » Patients often face **barriers to diagnosis and treatment**, including fragmentation and **poor coordination** of health care services.
- » On whole, there is **little personalization or responsiveness** in sleep care and with so many different players involved, costs balloon and outcomes suffer.

## THE COMPANY'S SOLUTION

- » **Dreem**, an **IMPACT** Member, is a **virtual first sleep clinic**, integrating all steps of the patient journey remotely. It provides consults and diagnosis, and insomnia and OSA virtual first care that integrates data and technology to improve health outcomes.
- » Reconstructing the sleep care pathway enables Dreem to optimize many of the **unique benefits of V1C**. In addition to improved access, Dreem offers a **more cost effective experience to insurance companies** that matches or exceeds traditional care outcomes.
- » Dreem **built its entire patient journey using existing CPT codes**, which makes it easier to work with payers that use traditional payment models and allows Dreem to promote greater accessibility.

## WHY IT MATTERS

- » Leveraging a **Fee for Service** (FFS) payment model, in which individual, visit-based services are covered by traditional CPT codes can pose challenges for V1C, as common **components**, including including app-based activities, coaching, async interactions, and RPM to name a few, don't fit into traditional coding.

### The IMPACT Resource to Use

Building a patient journey around current reimbursement can be done by **using the V1C Coding Library\***, which pulls codes relevant to virtual first care into a single library.

*\*Given the rapid evolution of V1C and our commitment to keeping pace, we invite you to [submit](#) updates and additions to the library.*