Effective Date: 12/14/2016

Nevada Health Solutions LLC

NHS MEDICAL POLICY

Home Blood Pressure Monitor
DME 2016-002

A home blood pressure monitor may be indicated when All of the following are present:

1	A home blood pressure monitor is allowed by the member's health plan rules.
2	The ordering provider intends intermittent blood pressure readings to be taken by the patient or caregiver using a home monitor.
3	The ordering provider has documented one of the following indications for home blood pressure measurement: • "White coat hypertension" (higher BP in a health care setting) is suspected. • Unexplained variation in blood pressure values requires assessment in the home setting. • The adequacy of antihypertensive therapy requires evaluation in the home setting. • Hypotensive symptoms require evaluation in the home setting. • Preeclampsia is suspected or is being actively monitored in a pregnant woman.
4	The ordering provider has documented that patient or caregiver education in the use of the home blood pressure monitor has occurred or will occur. Where there is a hypertension education class offered by the member's health plan, documentation of attendance has also been submitted.
5	The ordering provider has documented that patient or caregiver education includes all of the following: • Parameters for acceptable blood pressure readings • Instruction on specific actions to take for blood pressure readings outside of parameters • Instruction on when to contact the provider's office or seek medical attention
6	The ordering provider has documented that close follow up in the provider's office will be done. This home device is not to be substituted for ongoing medical care.

Note: This policy does not apply to the use of continuous ambulatory blood pressure monitoring (ABPM) devices. These are noninvasive recording devices that measure systolic and diastolic blood pressure every 15 to 30 minutes, when a patient is awake or asleep, over a period of 24 to 72 hours. ABPM devices are addressed in Milliman Care Guidelines, current version, MCG A-0123 Ambulatory Blood Pressure Monitoring, 24-Hour.

SOURCES

1. http://www.heart.org/HEARTORG/Conditions/HighBloodPressure/SymptomsDiagnosisMonitoringofHighBloodPressure/Home-Blood-Pressure Monitoring_UCM_301874_Article.jsp#.V_VK28Ln85s

2. Hemmelgarn BR, et al, The 2005 Canadian Hypertension Education Program recommendations for the management of hypertension: part 1- blood pressure measurement, diagnosis and assessment of risk, Can J Cardiol, 2005; 21(8):645.

3. Mancia G, et al, 2013 ESH/ESC Guidelines for the management of arterial hypertension: the Task Force for the management of arterial hypertension of the European Society of Hypertension (ESH) and of the European Society of Cardiology (ESC), J Hypertens, 2013; 31(7):1281.

4. Weber MA, et al, Clinical practice guidelines for the management of hypertension in the community a statement by the American Society of Hypertension and the International Society of Hypertension, J Hypertens, 2014; 32(1):3.

CODE REFERENCE (This may not be a comprehensive list of codes to apply to this policy.)

HCPCS A4670

POLICY HISTORY/REVISION INFORMATION

Date	Action/Description
12/13/2017	Annual review and approval by UM Committee
12/13/2018	Annual review and approval by UM Committee
12/12/2019	Annual review and approval by UM Committee
12/10/2020	Annual review and approval by UM Committee
12/10/2021	Annual review and approval by UM Committee
12/21/2022	Annual review and approval by UM Committee
12/20/2023	Annual review and approval by UM/QM Committee