SELF-MEASUREMENT OF BLOOD PRESSURE (SMBP)
Education and Billing Guide
The tools and information in this guide are provided to assist pharmacies in serving the needs of patients with hypertension in need of automated blood pressure monitors. This information is not to be used as a substitute for professional training and judgment. PSW has made every effort to ensure the accuracy of the contents included in this guide. Use of this information indicates acknowledgment that PSW will not be responsible for any loss or injury, including death, sustained in connection with or as the result of using this information. When making judgments regarding specific medications, pharmacists should consult the complete information available in the product prescribing information or other published literature as appropriate. PSW is under no obligation to update information contained herein.
Tips to Get an Accurate Blood Pressure Reading

Preparation steps
Avoid caffeine, smoking, alcohol, exercise, eating a large meal, or using decongestants 30 minutes prior to measurement.
- Feet should be flat on the floor, use a stool if needed
- Back supported
- Sit comfortably and relax for five minutes
- Empty bladder beforehand

When Measuring
- Lower edge of the cuff is one inch above elbow
- Tight enough to fit two fingers under the cuff
- Tubing runs down the arm

Steps
- Press the button
- Write down the measurement
- Wait one minute and repeat

Don’t Talk During Measurement
Don’t watch tv, text, or have other distractions during the measurement

Cuff Goes on Bare Arm
Place arm slightly bent on table, palm up, upper arm close to heart level

Important
Feet supported
Legs uncrossed

Back Supported
SIMPLE TIPS TO GET AN ACCURATE BLOOD PRESSURE READING

The common positioning errors can result in inaccurate blood pressure measurement. Figures shown are estimates of how improper positioning can potentially impact blood pressure readings.

Sources:
2. Handler J. The Importance of accurate blood pressure measurement. The Permanente Journal/Summer 2009/Volume 13 No. 3 S1

This 7 simple tips to get an accurate blood pressure reading was adapted with permission of the American Medical Association and The Johns Hopkins University. The original copyrighted content can be found at www.ama-assn.org/ama-johns-hopkins-blood-pressure-resources.
# Home Blood Pressure Diary

Name: __________________________

Target Blood Pressure: lower than _______________________

Remember to bring this diary with you to your next appointment/review

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Systolic Top number</th>
<th>Diastolic Bottom Number</th>
<th>Arm</th>
<th>Systolic Top number</th>
<th>Diastolic Bottom Number</th>
<th>Arm</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample: 7/27</td>
<td>AM</td>
<td>8:25</td>
<td>144</td>
<td>L</td>
<td>146</td>
<td>96</td>
<td>L</td>
<td>Felt a bit dizzy when I woke up</td>
</tr>
<tr>
<td></td>
<td>PM</td>
<td>6:30</td>
<td>136</td>
<td>L</td>
<td>136</td>
<td>88</td>
<td>L</td>
<td>Low stress day at work</td>
</tr>
</tbody>
</table>
TRAINING RESOURCES

Blood Pressure Measurement Instructions
https://www.heart.org/-/media/files/health-topics/high-blood-pressure/how_to_measure_your_blood_pressure_letter_size.pdf

Healthy Recommendations for Adults
https://www.pswi.org/Portals/94/Resources/Toolkits%20and%20Manuals/Lifestyle%20Toolkit_11%20X%208.5.pdf?ver=6bsTUYDMUTMAh2TmS-9PDA%3d%3d

How to Manage Weight

How to Be More Active

Hypertension Guideline Toolkit for Pharmacists
http://aha-clinical-review.ascendeventmedia.com/books/aha-high-blood-pressure-toolkit-pharmacists/

Metastar Video: Patient Self Management of Blood Pressure
https://www.metastar.com/providers/elearning-modules/elearning-module-patient-self-measurement-blood-pressure/

Small Steps for Your Health

A Snapshot: Blood Pressure in the U.S.: Make Control Your Goal
https://www.cdc.gov/bloodpressure/infographic.htm
Your patient is eligible to receive an automated blood pressure monitor through their insurance for at-home monitoring. Please review the following order, sign if in agreement, and fax to XXX-XXX-XXXX.

We will review how to use the monitor, proper positioning, and blood pressure goals as documented below.

Please contact us with questions.

Sincerely,

Pharmacist Name
Pharmacy

Patient:___________________________ Date:_________________

DOB:___________________________

Rx: Automated Blood Pressure Monitor

Directions: Use as directed at least once daily for at home blood pressure monitoring.

Qty: 1

DX/ICD-10: ____________________________________________

BP Goal:

Refills: PRN

NPI/DEA#: __________________________

MD Signature: __________________________
WISCONSIN FORWARDHEALTH FEE FOR SERVICE

• A patient presents with a prescription for an Automatic Blood Pressure Monitor (or pharmacy staff flags patient as eligible patient for blood pressure monitoring at home and obtains a prescription from the patient’s prescriber).

• The prescription needs to contain the prescriber’s name, NPI, and Diagnosis (Dx) code. Directions should contain daily monitoring of blood pressure as medically necessary.

• Log into the Forward Health Portal.
  - Submit Professional Claim
    » Enter Member ID # and hit tab
    » Enter Total Charge (the pharmacy Usual & Customary amount)
    » Click Diagnosis
    » Enter Dx code (without decimal point) in box 1
    » From/To DOS is the date the patient received the monitor
    » Procedure code: A4670
    » Dx code pointer: 1
    » Units: 1
    » Charge: must be same Usual & Customary amount entered above
    » Place of Service: 01 (pharmacy)
    » Rendering Provider: prescriber NPI number, click search and select prescriber
    » Submit

• The ForwardHealth Online Handbook For Blood Pressure Monitor topic (#1842) contains more information on coverage of blood pressure cuffs and monitors.

• The Durable Medical Equipment Index (see Home Health) identifies all allowable HCPCS codes and Medicaid Fee-for-Service reimbursement including automatic blood pressure monitors.
- Blood pressure cuffs and automatic blood pressure monitors are covered through Wisconsin Medicaid Fee-for-Service without prior authorization. The product must be medically necessary. There is no diagnosis restriction for reimbursement.
- Pharmacies do not need to be Medicaid enrolled as a DME vendor to submit these claims.
- It is important to ensure Medicaid eligibility:
  » Check patient eligibility on the ForwardHealth portal and/or:
  » Run a Medicaid test claim in your dispensing software system
- All providers have up to one year to bill; therefore:
  » Ask the patient if they have an automatic blood pressure monitor covered by Medicaid from another provider.
  » Consider calling the DAPO center to ensure that the patient hasn’t received an automatic blood pressure monitor from another entity recently. This helps to ensure your payment without a PA.
- Medicaid managed care organizations (MCOs) must cover the same procedure codes as Fee-for-Service. Prior authorization and reimbursement processes may be different. If a provider is working with a specific Wisconsin Medicaid MCO, they should contact the specific Medicaid MCO for further information.
- Note: WI SeniorCare members are not eligible for this benefit.
- The pharmacy is required to have a prescription on file for the blood pressure monitor. A fax template to customize is included in this guide, or consider developing a collaborative practice agreement with specific physicians.
  - Pharmacies can also bill through Part B vendors as done for other DME supplies:
    BIN#: 004766
    PCN: WIDME
    ID: patient Medicaid ID
  - Cost sharing for DME is as listed in this table from the DME Index:

<table>
<thead>
<tr>
<th>Item Max Fee</th>
<th>Copayment</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0.00 - $10.00</td>
<td>$0.50</td>
</tr>
<tr>
<td>$10.01 - $25.00</td>
<td>$1.00</td>
</tr>
<tr>
<td>$25.01 - $50.00</td>
<td>$2.00</td>
</tr>
<tr>
<td>$50.01 and up</td>
<td>$3.00</td>
</tr>
</tbody>
</table>

- Rental equipment is not subject to copayment, but rental payments do count towards the max fee of the item, and copayment is required if the equipment is later purchased.
# Blood Pressure Monitor Coverage through BadgerCare Plus MCOs

<table>
<thead>
<tr>
<th>HMO</th>
<th>Can Pharmacy Provide BP Monitor?</th>
<th>Pharmacy Requirement &amp; Reimbursement Process</th>
<th>Notes</th>
<th>Counties Covered</th>
</tr>
</thead>
</table>
| **Anthem Blue Cross and Blue Shield**    | Yes                              | 1. Prescription must come from primary provider or specialist.  
2. Prior Authorization (PA) will need to be submitted by prescriber.  
3. CMS 1500 form; Submit electronically to ForwardHealth Portal or Mail physical copy.                                                                                                                                                                                        | • BCBS is contracted with Edgepark Medical Supplies for distributing DME. If unable to get it covered through the pharmacy, providers can send prescription to Edgepark Medical Supplies. Mail order service provided.  
• Provider’s customer service: 1-855-558-1443  
• Edgepark Medical Supplies: 1-800-321-0591  
• Mailing Address: 213 Blettner Blvd. Madison, WI. 53714                                                                                                                                  | All counties                                                                                                             |
| **Children’s Community Health Plan**     | No                               | N/A                                                                                                                                                                                                                                           | • DME for BP monitors billed under medical. Dean has specific vendors that they work with (SSM Health at Home and others), depending on where the patient is located.  
| **Dean Health Plan**                      | No                               | N/A                                                                                                                                                                                                                                           |                                                                                                                                                                                                     | Columbia, Dane, Dodge, Fond du Lac, Green Lake, Iowa, Jefferson, Rock, Sauk                        |
| **Group Health Cooperative - Eau Claire** | Yes                              | 1. Fill out paper CMS 1500 form  
2. Mail to:  
Group Health Cooperative  
P.O. Box 3217  
Eau Claire, WI 54702                                                                                                                                                                           | • Pharmacy needs to be contracted as DME provider.  
• Customer service: 1-888-203-7770                                                                                                           | Adams, Ashland, Barron, Bayfield, Buffalo, Burnett, Chippewa, Clark, Columbia, Crawford, Douglas, Dunn, Eau Claire, Forest, Grant, Green, Iowa, Iron, Jackson, Juneau, La Crosse, Lafayette, Langlade, Lincoln, Marathon, Monroe, Oneida, Pepin, Pierce, Polk, Portage, Price, Richland, Rusk, St Croix, Sawyer, Shawano, Sauk, Taylor, Trempealeau, Vernon, Vilas, Washburn, Wood |
| **Group Health Cooperative - South Central Wisconsin** | Yes                              | 1. Contract with GHC-SCW by filling out [this form](#).  
2. In notes section, pharmacies should write “My pharmacy wants to join the GHC-SCW network to be able to bill for blood pressure cuffs for BadgerCare Plus Members (per the Medicaid benefit)”  
3. GHC-SCW will then approve and send a contract for pharmacy to sign  
4. Identify patients who are eligible and would benefit from a BP monitor  
5. Obtain an order from a physician for an “A4670 – Automatic Blood Pressure Monitor”  
6. Fill out paper CMS 1500 form Mail to: Group Health Cooperative of South Central Wisconsin  
ATTN: Claims Department  
1265 John Q Hammons Drive, Ste 200  
P.O. Box 44971  
Madison, WI 53717-1962  
7. Reimbursement of $63.90 will be provided to the pharmacy                                                                                                                                          | Jack Donisch, Government Programs Contract Administrator. Contact: [jdonisch@ghescw.com](mailto:jdonisch@ghescw.com)                                                                 | Dane                                                                                                                             |
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| Inclusa (Family Care)        | Yes                             | 1. Identify patients who are eligible and would benefit from a BP monitor  
2. Obtain an order from a physician  
3. Contact patient’s managed care nurse and ask for an authorization for HCPCS: A4670 (BP monitor) for total dollar amount of the BP monitor  
4. Once approved, pharmacy should receive authorization on the Inclusa portal  
5. Print out authorization and dispense the monitor  
6. Recommendation: bill claims on paper once weekly | • Pharmacy needs to be contracted  
• If pharmacy able to provide equipment on DME side, then pharmacy should be able to provide BP monitors  
• Eligibility: If a Medicaid patient would benefit from a BP monitor but you are unsure of whether they are eligible check MCO coverage on Medica. | Adams, Brown, Calumet, Columbia, Crawford, Door, Florence, Fond du Lac, Grant, Green, Green Lake, Iowa, Jackson, Juneau, Kenosha, Kewaunee, La Crosse, Lafayette, Manitowoc, Marinette, Marquette, Milwaukee, Monroe, Oconto, Outagamie, Ozaukee, Racine, Richland, Sauk, Shawano, Sheboygan, Trempealeau, Vernon, Walworth, Washington, Waukesha, Waupaca, Winnebago |
<p>| Independent Care Health Plan (iCare) | No                             | N/A                                                                                                        | N/A   | All counties                      |
| MHS Health Wisconsin and Network Health Plan | No                             | N/A                                                                                                        | N/A   | Rock, Walworth                    |
| MercyCare Insurance Company  | No                             | N/A                                                                                                        | N/A   | Brown, Calumet, Dane, Dodge, Door, Florence, Fond du Lac, Forest, Green Lake, Jefferson, Kenosha, Kewaunee, Lincoln, Manitowoc, Marathon, Marinette, Marquette, Milwaukee, Oconto, Oneida, Outagamie, Ozaukee, Portage, Racine, Shawano, Sheboygan, Vilas, Walworth, Washington, Waukesha, Waupaca, Waushara, Winnebago |
| Molina Health Care           | No                             | N/A                                                                                                        | N/A   | Brown, Calumet, Dane, Dodge, Door, Florence, Fond du Lac, Forest, Green Lake, Jefferson, Kenosha, Kewaunee, Lincoln, Manitowoc, Marathon, Marinette, Marquette, Milwaukee, Oconto, Oneida, Outagamie, Ozaukee, Portage, Racine, Shawano, Sheboygan, Vilas, Walworth, Washington, Waukesha, Waupaca, Waushara, Winnebago |
| Security Health Plan of Wisconsin | No                             | N/A                                                                                                        | N/A   | Adams, Ashland, Barron, Bayfield, Buffalo, Burnett, Chippewa, Clark, Crawford, Dodge, Douglas, Dunn, Eau Claire, Forest, Green Lake, Iron, Jackson, Juneau, La Crosse, Langlade, Lincoln, Marathon, Marquette, Monroe, Oneida, Outagamie, Pepin, Pierce, Polk, Portage, Price, Richland, Rusk, St. Croix, Sawyer, Shawano, Taylor, Trempealeau, Vernon, Vilas, Washburn, Waupaca, Waushara, Woot |</p>
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</table>
| Quartz                                 | Yes                             | 1. Fill out CMS 1500 form using CPT code: A4670  
2. Mail to:  
P.O. Box 610  
Sauk City, WI. 53583-0610                                                                 | • Pharmacy needs to be contracted for DME  
• Customer service: 1-800 362-3310                                                                 | Adams, Buffalo, Columbia, Crawford, Dane, Dodge, Fond du Lac, Grant, Green, Iowa, Jackson, Jefferson, Juneau, La Crosse, Lafayette, Marquette, Mon-roe, Richland, Rock, Sauk, Trempealeau, Vernon |
| Trilogy Health Insurance               | Yes                             | 1. Process blood pressure monitor prescription as you would a regular prescription.  
2. PA required for items that cost $500 or more                                                                 | • Customer service: 1-855-530-6790                                                                 |                                                                                       |
| United-Healthcare of Wisconsin         | No                              | N/A                                                                                                         | • DME only covered under health plan if there is a prescription or is medically necessary.  
• Customer service: 1-800-504-9660  
• Member advocate team – 1-888-246-8140                                                                 | All counties                                                                            |
| Care Wisconsin Health Plan             | No                              | N/A                                                                                                         | • Prescription sent by physician does not automatically qualify patient to receive BP monitor  
• Script must be sent to Care Wisconsin Health Plan  
• Script gets reviewed by a case manager and a nurse. If approved, Care Wisconsin will provide through their vendor. |                                                                                       |

*HMOs that also cover Elderly, Blind, or Disabled, and SSI Medicaid Members
Information is current as of June 30, 2021

PSW appreciates readers sharing updates, successes and challenges from pharmacies regarding this information. Please email info@pswi.org with comments.
Billing: Neugen (WEA Trust, Health Tradition)

- If a patient has WEA Trust/Health Tradition coverage (benefit card will have either WEA Trust or Health Tradition printed on the card), pharmacies can provide an automatic blood pressure monitor (options to charge for pharmacist training on proper use) at no charge to the patient.
- A patient presents with a prescription for an automatic blood pressure monitor (or staff flags patient as eligible for automatic blood pressure monitoring at home and obtains a prescription from the patient’s prescriber)
- Process the prescription as a prescription
  - There are two covered blood pressure monitors:
    » Omron Series 5 Blood Pressure Monitor: NDC# 73796-0267-25
    » Omron Series 10 Blood Pressure Monitor: NDC# 73796-0267-45
- Pharmacies will also be reimbursed a $25 professional fee to cover training in proper use of the monitor
  - To submit blood pressure education claim, submit additional NDC# 99999-0850-32
- If any questions arise regarding the claim’s submission, please contact Neugen pharmacy department at 1.800.279.4000 ext. 6760 for Amy or ext. 6676 for Alan.