

# Georgia Medicaid Program Coverage Update: Guide to utilizing Self-Measured Blood Pressure (SMBP) benefits

## General steps for ordering devices and providing clinical support to eligible patients on Medicaid:

### Step 1: Determine if patient is eligible for device

- Patients eligible for blood pressure (BP) devices are outlined in the Georgia Department of Community Health [Policies and Procedures Manual for Durable Medical Equipment Services](#) (Policy 1117, p. 188-189)

	Blood Pressure Device	Blood Pressure Cuff
<b>Eligibility</b>	HTN-related diagnosis, covered once every 5 years	HTN-related diagnosis, covered once every 2 years
<b>Prior Authorization Requirement</b>	Once/5 years	Once/2 years

- Validated blood pressure devices are covered for beneficiaries 18 years and older with a hypertension-related diagnosis code (eg, I10, N17-19), once every five years. Blood pressure cuffs are covered once every two years. Prior authorization is required for both device and cuff.
- The covered device must be validated according to the US Blood Pressure Validated Device Listing (VDL) which can be viewed at [validatebp.org](http://validatebp.org).

### Step 2: Complete Certification of Medical Necessity for Blood Pressure Monitor

- Download resource [here](#)
- Identify primary diagnosis and relevant ICD diagnosis code, as well as any secondary diagnosis as applicable
- Indicate the last three blood pressure measurements of the beneficiary
- Note how frequently beneficiary should check blood pressure as part of treatment plan
- Certify date of face-to-face evaluation date with member within last 6 months

### ○ **Step 3:** Submit documentation and prior authorization (PA)

Use one of the following methods to submit the PA request:

- Written order
- Direct entry into [Georgia Medicaid Management Information System \(GAMMIS\)](#)
- Electronic through EHR or practice management software

### ○ **Step 4:** Receive notification of PA status from GAMMIS

- Approved – notify beneficiary
- Denied – address denial reason
- Resubmit – provide additional documentation, if requested

### ○ **Step 5:** Check that patient has received their device

- Beneficiary should receive notification on how to obtain their device from an approved medical supplier (pick up or home delivery), and may be provided with training via a DME supplier

### ○ **Step 6:** Initiate SMBP with patient

- When patient receives device, ask patient to conduct an in person or virtual visit for initial cuff fitting and training on how to use the device

### ○ **Step 7:** Provide patient with ongoing SMBP support

- Follow SMBP protocol (see resources for more information)
- Share plan with patient on how often to take readings, record them, and communicate back
- Update treatment plan as necessary based on SMBP readings

### ○ **Step 8:** Sustain your SMBP program

- Submit claims for SMBP clinical services using CPT® codes
  - Medicaid providers may be reimbursed for SMBP services using 99473, for patient device education and training, and 99474, for data collection and interpretation in Georgia

# Resources

## Policy

- [Georgia Policies and Procedures Manual for Durable Medical Equipment Services](#)

## Patient Eligibility

- [Certification of Medical Necessity for Blood Pressure Monitor](#)
- [PA, Waiver, and Medical Claims Materials](#)

## Initiating SMBP with patients

- [AMA 7-step SMBP Quick Guide](#)
- [US Blood Pressure Validated Device Listing \(VDL\)<sup>™</sup>](#)
- [SMBP Jumpstart](#)

