Self-Measured Blood Pressure (SMBP)  
A brief introduction of SMBP Program Implementation and Reimbursement for healthcare professionals.

**Process**

1. **Infrastructure Building**
   - Designate project champion and define roles and responsibilities
   - Develop program workflow
   - Acquire necessary equipment: ie, blood pressure cuffs for loaner program and patient educational materials
   - Train providers and care team how to engage and manage patients in SMBP
   - Ensure care team has regular training of accurate blood pressure measurement

2. **Identify and Refer Patients**
   - Patients with suspected hypertension: white coat or masked hypertension
   - Patients with diagnosed hypertension
   - Check EHR to confirm accuracy and documentation of diagnosis codes
   - Refer and enroll patient in SMBP program
   - Document referral in EHR

3. **Educate Patient on SMBP Process**
   - Educate patients about the importance of blood pressure control and how SMBP monitoring works
   - Advise patients how to get a validated blood pressure cuff (see step 4)
   - $ Train patients to accurately use blood pressure monitors
   - $ Train patients how to document their blood pressure readings

4. **Provide Clinical Supports**
   - Assist patients in getting a blood pressure monitor:
     - Enroll patient in clinic loaner program or encourage individual purchase with insurance coverage or out of pocket payment
     - Calibrate home blood pressure monitors
   - Provide outreach support:
     - $ Clinic-Based or Telemedicine
     - $ Share medication adherence strategies
     - $ Provide lifestyle modification counseling and education

5. **Closed Loop Provider Feedback**
   - Develop mechanism for patients to submit blood pressure readings back to clinic care team
   - $ Provider interprets results
   - $ Provider shares results with the patient: Details care plan with treatment and self-management goals
   - Develop and document follow up plan

6. **Documentation and Follow Up**
   - Use the EHR to document patient diagnoses, care plans, and treatment outcomes
   - Regularly provide care teams and leadership staff with a dashboard to review SMBP goals, metrics and performance
   - Review workflows to ensure efficiency
   - Ensure care team has up-to-date workflows

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**Reimbursement**

**SMBP Specific CPT Codes**

- 99473 SMBP using a validated device; patient education and device calibration. Can be submitted once per device.
- 99474 Patient submits SMBP readings to qualified health care professional; creation and communication of results and treatment plan. Can be submitted monthly.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Reimbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td>99091</td>
<td>Reimbursement for professional time dedicated to monitoring services and does not require interactive communication (like 99457) to bill. Requires a physician or other QHP to perform these services, and requires 30 minutes of time every 30 days to bill. 99457 and 99091 cannot be billed concurrently.</td>
<td>$58.38</td>
</tr>
<tr>
<td>99453</td>
<td>Reimbursement for the work associated with onboarding a new patient onto an RPM service, setting up the equipment and educating the patient on using the equipment.</td>
<td>$19.46</td>
</tr>
<tr>
<td>99454</td>
<td>Reimbursement for providing the patient with a RPM device for a 30-day period. Can be billed each 30 days.</td>
<td>$64.15</td>
</tr>
</tbody>
</table>

**Remote Patient Monitoring CPT Codes**

- Relates to step 4
- 99475 Reimbursement for clinical staff time that contributes toward monitoring and interactive communication which includes phone, text and email. Average national Medicare payment: $51.54 (non-facility) and $32.44 (facility).

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1. For additional information regarding SMBP processes, see TargetBP.com, NACHC SMBP Implementation Guide, and the Million Hearts Hypertension Control Change Package for Clinicians***
2. For complete information regarding use of CPT codes, see the American Medical Association.
4. Average National Medicare Payment as of January 2020