
Medical Policy



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Category: Medicine

Title: Ambulatory Blood Pressure Monitoring

**Procedure Code(s):
93784, 93786,
93788, 93790**

Description/Background

An ambulatory blood pressure monitor is a portable automatic or semiautomatic device that records blood pressure during activities of daily living. Ambulatory blood pressure monitoring generally occurs over a 24-hour period and provides an accurate estimate of the patient's average blood pressure, degree of variability, and the effectiveness and duration of action of antihypertensive agents. However, improved long-term patient outcomes have not been demonstrated when compared to standard measurement practices for known hypertensive patients.

The intent of ambulatory blood pressure monitoring is to provide the physician with a more detailed picture of a patient's blood pressure, as compared to monitoring only in a clinical setting. Ambulatory blood pressure monitoring for the evaluation of suspected "white coat hypertension" (a.k.a. isolated clinic hypertension) has been noted in the clinical literature since at least 1995. White coat hypertension is defined as an elevated office blood pressure greater than 140/90mm Hg on at least three separate clinic/office visits with at least two documented readings outside the office which are less than 140/90 and no evidence of end organ damage.

Information obtained by ambulatory blood pressure monitoring is sometimes necessary in order to determine the appropriate management of a patient in this situation. This group of patients might otherwise be treated based on office blood pressure readings alone. Ambulatory blood pressure monitoring might improve outcomes by allowing these patients to avoid unnecessary treatment.

CPT/HCPCS Level II Codes and Description

- 93784 Ambulatory blood pressure monitoring, utilizing a system such as magnetic tape and/or computer disk for 24 hours or longer; including recording, scanning analysis, interpretation and report
- 93786 Ambulatory blood pressure monitoring, utilizing a system such as magnetic tape and/or computer disk, for 24 hours or longer; including recording, scanning analysis, recording only
- 93788 Ambulatory blood pressure monitoring, utilizing a system such as magnetic tape and/or computer disk, for 24 hours or longer; including recording, scanning analysis, scanning analysis with report
- 93790 Ambulatory blood pressure monitoring, utilizing a system such as magnetic tape and/or computer disk, for 24 hours or longer; including recording, scanning analysis, physician review with interpretation and report

Diagnoses/Medical Conditions

White coat hypertension

Medical Policy Statement

Ambulatory blood pressure monitoring is established as safe and effective for measuring blood pressure, and may be considered a useful diagnostic option to evaluate hypertension noted only in the office setting (i.e. isolated clinic hypertension).

Rationale

Ambulatory blood pressure monitoring is not established as having greater utility or improved outcomes over standard blood pressure measurement practices for following patients with known hypertension, predicting target organ damage, or for the assessment of pharmacologic antihypertensive therapy. Ambulatory blood pressure monitoring may be considered a useful option for the diagnosis of isolated clinic hypertension.

Medical Policy Position Summary (Non-clinical summary statement for customer use)

Ambulatory blood pressure monitoring is established as safe and effective for measuring blood pressure, and may be considered a useful diagnostic option to diagnose isolated clinic hypertension.

Inclusionary and Exclusionary Guidelines (Clinically based guidelines that may support individual consideration and pre-authorization decisions)

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Ambulatory blood pressure monitoring is covered when all the following criteria have been met:

- Office blood pressure greater than 140/90mm Hg on at least three separate clinic/office visits with two separate measurements made at each visit
- At least two documented blood pressure measurements taken outside the office which are less than 140/90mm Hg
- No evidence of end-stage organ damage.
- The information obtained by ambulatory blood pressure monitoring is necessary in order to determine the appropriate management of the patient

Patients requiring more than one evaluation of ambulatory blood pressure monitoring must again meet the qualifying criteria.

Ambulatory blood pressure monitoring is not covered:

- For the diagnosis and follow up of hypertension in adults or children.
- The assessment of pharmacologic antihypertensive therapy.
- For predicting target organ damage.

Related Policies

N/A

Medicare Information

National Coverage Determinations, Ambulatory Blood pressure Monitoring, publication number 6, effective date of this version 4/1/02: "Ambulatory blood pressure monitoring is only covered for those patients with suspected white coat hypertension."

(The above Medicare information is current as of the review date for this policy. However, since Medicare coverage issues and policies may be updated or revised by Centers for Medicare & Medicare Services (CMS, formerly HCFA) on a frequent basis, the most current information may not be contained in this document. For the most current information, you should contact an official source.)

References

- Automated Ambulatory Blood Pressure Monitoring for the Diagnosis of Hypertension in Patients with Elevated Office Blood Pressure, Blue Cross Blue Shield Association, Policy 1.01.02, Issue Date 12/1/95 review date 6/18/99, replace policy 10/8/02.
 - Ambulatory Blood Pressure Monitoring With Fully Automatic and Semiautomatic Portable Monitors, Winifred S. Hayes, Inc, first published January 23, 1991, reviewed and updated June 1, 1998, reformatted and reissued April 7, 1999.
 - http://www.bcbs.com/consumertec/ctect_whitecoat_hyper.htm, Is 24-Hour Ambulatory Blood Pressure Monitoring Useful to Diagnose White Coat Hypertension, TEC, prepared Dec 2001.
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- http://cms.hhs.gov/ncd/searchdisplay.asp?NCD_ID=254&NCD_vrsn_num=1, Centers for Medicare and Medicaid Services, National Coverage Determinations, Ambulatory Blood Pressure Monitoring, last modified January 16, 2003
- http://www.wellmark.com/come/e_business/provider/medical_policies/policies/ambulatory_bp_k..n, Wellmark, Blue Cross Blue Shield, Ambulatory Blood Pressure Monitoring, September 2002.
- <http://content.nejm.org/cgi/content/full/347/11/778?maxtoshow=&HITS=20&hits=20&RES>, New England Journal of Medicine, Ambulatory Blood Pressure Monitoring as a Predictive Tool, volume 347:778:779 Number 11, September 12, 2002.
- http://www.mja.com.au/public/issues/176_12_17062/mcg10817_fm.html, Barry P. McGrath, Medical Journal of Australia, Ambulatory Blood Pressure Monitoring, Accepted April 11, 2002.
- William F Graettinger MD, FACC, Current Diagnosis and Treatment In Cardiology, Systemic Hypertension, Essentials of Diagnosis, 1st Ed (1995)
- General Medicine, Evaluation, Measurement Issues, 3rd Ed (1997).

The articles reviewed in this research include those obtained in an Internet based literature search for relevant medical references through 2/7/03 the date the research was completed.

Joint BCBSM/BCN Medical Policy History

Date	Rationale
4/6/03	Joint policy completed; policy retired

Next Review: 2nd Qtr, 2005

Pre-Consolidation Medical Policy History

Original Policy Date		Comments
BCN	N/A	Revised: N/A
BCBSM	N/A	Revised: N/A