

MedStar Health, Inc.

POLICY AND PROCEDURE MANUAL

Policy Number: MP.068.MH
Last Review Date: 02/21/2019
Effective Date: 04/01/2019

MP.068.MH – Home PT/INR Monitoring

This policy applies to the following lines of business:

- ✓ MedStar Employee (Select)
- ✓ MedStar CareFirst PPO

MedStar Health considers **Home Prothrombin Time/International Normalized Ratio (PT/INR) Monitoring** medically necessary for members on warfarin needing long-term (> six months) or life-long coagulation for any of the following conditions:

- a) Mechanical heart valves
- b) Chronic atrial fibrillation
- c) Venous thromboembolism inclusive of deep vein thrombosis (DVT) and pulmonary embolism (PE)

AND

All of the following requirements have to be met for Home PT/INR monitoring of a member:

1. The device must be FDA approved
2. The patient must have been anticoagulated for at least three months prior to the use of the home PT/INR device
3. The patient must undergo a documented face-to-face educational program on anticoagulation management demonstrating the correct use of the device prior to its use in the home
4. The patient continues to correctly use the device for anticoagulation therapy following the initiation of home monitoring which is supported with documentation
5. Self-testing with the device should not occur more frequently than once a week
6. Only one provider may bill the review, interpretation and management of this service per period of four billable tests and this should be the ordering physician (G0250)

Limitations

- a) Porcine valves
- b) Poor eyesight with no caregiver
- c) Memory impairment
- d) Difficulty with motor coordination or manual dexterity
- e) History of noncompliance

Background

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The Centers for Medicare and Medicaid Services (CMS) provide an overview on the use of the International Normalized Ratio (INR) or prothrombin time (PT) and how it allows physicians to determine the level of anticoagulation in a patient independent of the laboratory reagents used. PT is the standard measurement for reporting the blood's clotting time. The INR is the ratio of the patient's PT (extrinsic or tissue-factor coagulation pathway) compared to the mean PT for a group of normal individuals.

Patient self-testing and self-management through the use of a home INR monitor may be used to improve the time in therapeutic rate (TTR) for select groups of patients. Increased TTR leads to improved clinical outcomes and reductions in thromboembolic and hemorrhagic events. Warfarin (also prescribed under other trade names, e.g., Coumadin®) is a self-administered, oral anticoagulant (blood thinner) medication that affects the vitamin K-dependent clotting factors II, VII, IX and X. A PT/INR monitoring system is a portable testing device that includes a finger-stick and an FDA-cleared meter that measures the time it takes for a person's blood plasma to clot.

There are at least three sites/methods for managing warfarin anticoagulation: 1] physician office-based testing and management 2] anticoagulation clinics 3] Home PT/INR monitoring with patient reporting or physician-directed self-management.

Codes:

CPT Codes / HCPCS Codes / ICD-10 Codes	
Code	Description
HCPCS codes covered if selection criteria are met (If Appropriate):	
G0248	Demonstration, prior to initiation of home INR monitoring, for patient with either mechanical heart valve(s), chronic atrial fibrillation, or venous thromboembolism who meets Medicare coverage criteria, under the direction of a physician; includes: face-to-face demonstration of use and care of the INR monitor, obtaining at least one blood sample, provision of instructions for reporting home INR test results, and documentation of patient's ability to perform testing and report results
G0249	Provision of test materials and equipment for home INR monitoring of patient with either mechanical heart valve(s), chronic atrial fibrillation, or venous thromboembolism who meets Medicare coverage criteria; includes provision of materials for use in the home and reporting of test results to physician; testing not occurring more frequently than once a week; testing materials, billing units of service include 4 tests

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G0250	Physician review, interpretation and patient management of home INR testing for a patient with either mechanical heart valve(s), chronic atrial fibrillation, or venous thromboembolism who meets Medicare coverage criteria; testing not occurring more frequently than once a week; billing units of service include 4 tests
ICD-10 codes covered if selection criteria are met:	
D68.51- D68.62	Primary hypercoagulable state
I26.01- I26.99	Pulmonary embolism (acute)
I27.82	Chronic pulmonary embolism
I48.0-I48.2	Chronic atrial fibrillation (persistent and paroxysmal)
I80.00-I80.9	Phlebitis and thrombophlebitis (including deep vein thrombosis)
I82.0-I82.1	Budd-Chiari syndrome / Thrombophlebitis migrans
I82.211	Chronic embolism and thrombosis of superior vena cava
I82.221	Chronic embolism and thrombosis of inferior vena cava
I82.291	Chronic embolism and thrombosis of other thoracic veins
I82.3	Embolism and thrombosis of renal vein
I82.401	Acute embolism and thrombosis of unspecified deep veins right lower extremity
I82.402	Left lower extremity
I82.403	Bilateral lower extremity
I82.409	Unspecified lower extremity
I82.501- I82.5Z9	Chronic embolism and thrombosis of lower extremity (deep) veins
I82.701- I82.729	Chronic embolism and thrombosis of upper extremity veins
I82.A21- I82.A29	Chronic embolism and thrombosis of axillary vein
I82.B21- I82.B29	Chronic embolism and thrombosis of subclavian vein
I82.C21- I82.C29	Chronic embolism and thrombosis of internal jugular vein

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I82.811- I82.819	Embolism and thrombosis of other specified veins
I82.891	Chronic embolism and thrombosis of other specified veins
Z95.2	Presence of prosthetic heart valve
Z79.01	Long-term (current) use of anticoagulants

References

1. Centers for Medicare and Medicaid Services (CMS): CMS Manual System-Pub 100-4 Medicare Claims Processing Transmittal 1562. Issued July 25, 2008. <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1562CP.pdf>
2. Centers for Medicare and Medicaid Services (CMS): Decision Memo (CAG-00087R) for Prothrombin Time (INR) Monitor for Home Anticoagulation Management. Issued: March 19, 2008. <http://www.cms.gov/medicare-coverage-database/details/nca-decision-memo.aspx?NCAId=209&fromdb=true>
3. Centers for Medicare and Medicaid Services (CMS): National Coverage Determination (NCD) No. (190.11) for Home Prothrombin Time /International Normalized Ratio (PT/INR) Monitoring for Anticoagulation Management. Effective March 19, 2008. <http://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=269&ncdver=2&bc=AgAAgAAAAAAAAAA%3d%3d&>
4. Department of Health and Human Services. National Heart, Lung, and Blood Institute: What is Deep Vein Thrombosis? Updated October 28, 2011. <http://www.nhlbi.nih.gov/health/health-topics/topics/dvt/>
5. Dignan R, Keech AC, GebSKI VJ et al. [Warfarin SMART Investigators]. Is home warfarin self-management effective? Results of the randomized Self-Management of Anticoagulation Research Trail. Int J Cardiol. 2013 Oct; 168(6): 5378-5384. <http://www.ncbi.nlm.nih.gov/pubmed/24083884>
6. Guyatt GH, Akl EA, Crowther M, et al. Executive summary: Antithrombotic therapy and prevention of thrombosis, 9th ed: American College of Chest Physicians evidence-based clinical practice guidelines, Chest. 2012 Feb; 141(2_Suppl), 7S-47S. <http://journal.publications.chestnet.org/article.aspx?articleid=1159399>

Disclaimer:

MedStar Health medical payment and prior authorization policies do not constitute medical advice and are not intended to govern or otherwise influence the practice of medicine. The policies constitute only the reimbursement and coverage guidelines of MedStar Health and its affiliated managed care entities. Coverage for services varies

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for individual members in accordance with the terms and conditions of applicable Certificates of Coverage, Summary Plan Descriptions, or contracts with governing regulatory agencies.

MedStar Health reserves the right to review and update the medical payment and prior authorization guidelines in its sole discretion. Notice of such changes, if necessary, shall be provided in accordance with the terms and conditions of provider agreements and any applicable laws or regulations.

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