

# Blood Pressure Devices

Plan: AmeriHealth Caritas Louisiana

Clinical Policy ID: CCP.4003

Recent review date: **2/2023**

Next review date: **6/2024**

Policy contains: Blood pressure devices; hypertension; hypotension

*AmeriHealth Caritas Louisiana has developed clinical policies to assist with making coverage determinations. AmeriHealth Caritas Louisiana's clinical policies are based on guidelines from established industry sources, such as the Centers for Medicare & Medicaid Services (CMS), state regulatory agencies, the American Medical Association (AMA), medical specialty professional societies, and peer-reviewed professional literature. These clinical policies along with other sources, such as plan benefits and state and federal laws and regulatory requirements, including any state- or plan-specific definition of "medically necessary," and the specific facts of the particular situation are considered by AmeriHealth Caritas Louisiana when making coverage determinations. In the event of conflict between this clinical policy and plan benefits and/or state or federal laws and/or regulatory requirements, the plan benefits and/or state and federal laws and/or regulatory requirements shall control. AmeriHealth Caritas Louisiana's clinical policies are for informational purposes only and not intended as medical advice or to direct treatment. Physicians and other health care providers are solely responsible for the treatment decisions for their patients. AmeriHealth Caritas Louisiana's clinical policies are reflective of evidence-based medicine at the time of review. As medical science evolves, AmeriHealth Caritas Louisiana will update its clinical policies as necessary. AmeriHealth Caritas Louisiana's clinical policies are not guarantees of payment.*

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## Policy statement

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Blood pressure devices are covered for beneficiaries receiving hemodialysis in the home setting; **are pregnant beneficiaries with a diagnosis of chronic hypertension; are beneficiaries under the age of 21 years diagnosed with hypertension or hypotension.**

**Only electronic blood pressure devices may be approved for beneficiaries under the age of 21 and for those who are pregnant.**

**Documentation of** medical necessity **is required.**

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## References

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**Louisiana Department of Health. 2010. Durable Medical Equipment Provider Manual. Blood Pressure Devices. Chapter 18, Section 18.2. Issued 12/16/2022.**

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## Policy updates

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Initial review date: 3/1/2021

**2/2023: Policy references updated.**