

# Icebreaker!

Would you rather live in  
the ocean or on the  
moon?

# **Self-Measured Blood Pressure (SMBP) Program**



**Presented: March 4, 2021**

# Housekeeping



All lines are muted.



Be prepared to  
share



Chat in your  
questions!

# Today's Presenters

- Kristen Schuster, Mountain-Pacific Quality Health, Senior Account Manager
- Jessica Newmyer, American Heart Association, Western States Community Impact Consultant

# Regional Partners

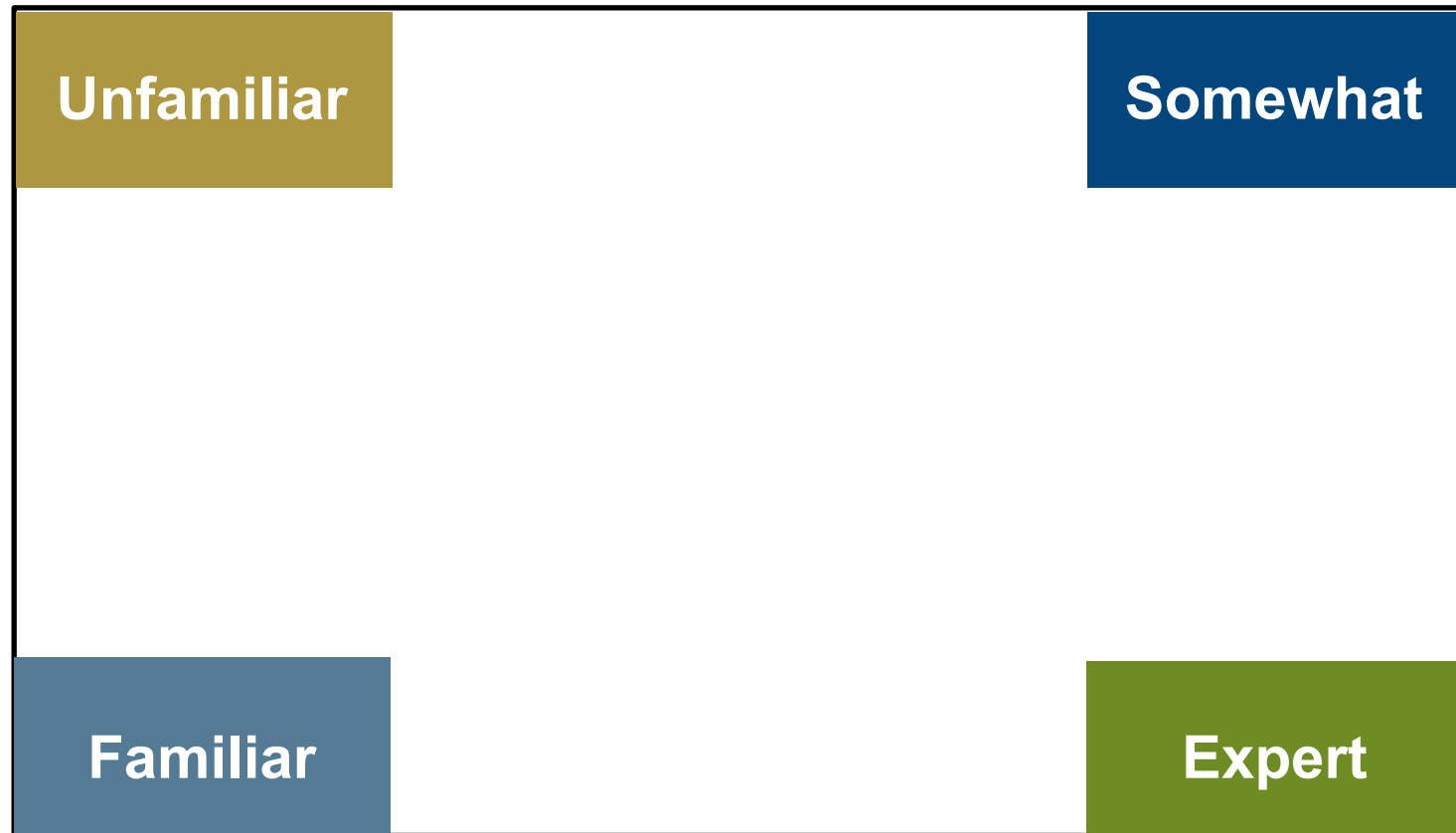
- Alaska Department of Health & Social Services
- American Heart Association
- Hawaii Department of Health
- Montana Department of Public Health & Human Services
- Montana Primary Care Association
- Mountain-Pacific Quality Health
- Wyoming Department of Health

# Today's SMBP Agenda

- Presentation
  - Self-measured blood pressure (SMBP) overview and benefits
  - Pre-implementation considerations
  - How to prepare for SMBP implementation
  - SMBP implementation and patient engagement
  - How to monitor your SMBP program
- Practice sharing
- Group discussion
- Leaving in action

# How familiar are you with SMBP?

*Polling question #1*



# What is SMBP?



Defined as regular measurement of blood pressure (BP) by the patient outside the clinical setting, either at home or elsewhere.

Requires patients to measure their own BP at different points in time using a home BP device and then report those results back to the clinical provider.



Evidence shows home BP monitoring, along with clinical support, helps patients with hypertension lower their blood pressure.

*Defined by Million Hearts<sup>®</sup>, a joint initiative of the Centers for Disease Control and Prevention (CDC) and Centers for Medicare & Medicaid Services (CMS).*



# Benefits implementing SMBP



## Patients

- Increase patient engagement
- Improve self-management support
- Improve medication adherence



## Providers

- Improve communication with care team
- Improve patient outcomes
- Increase quality measurement scores



## Organization

- Provides opportunities to increase practice revenue

# Pre-implementation considerations



## What to consider

- Budget
- Staffing
- Billing



## Equipment and program structure (loaner program, etc.)

- BP cuffs
  - Loaner program
  - Patient-owned devices
  - Other
- Electronic health record (EHR)
- Third-party software

# Prepare for implementation

- Communication
  - Staff
  - Patients
- Scheduling
- Workflows
- Training
  - Staff (new workflows, documentation, calibration, patient education/engagement, billing, etc.)
  - Patients
- EHR
- Documentation, materials, agreements (or consent)

# Polling question #2



**Which SMBP area do you have the most questions or concerns about?**

- a) Budgeting
- b) Billing
- c) Staffing
- d) Equipment
- e) Staff training
- f) Patient education
- g) Scheduling
- h) EHR functionality

# **SMBP PROGRAM IMPLEMENTATION AND PATIENT ENGAGEMENT**

# SMBP Implementation

## Steps for success!

- ▶ Identify patients for SMBP
- ▶ Teach patient how to perform SMBP
- ▶ Patient performs SMBP
- ▶ Receive patient data
- ▶ Interpret results
- ▶ Go over results with patient

# SMBP Implementation Resources

## Self-measured blood pressure

### Quick start guide

Self-measured blood pressure (SMBP) monitoring refers to the regular measurement of blood pressure (BP) by a patient in their home or elsewhere outside the clinical setting. SMBP enables health care providers to better diagnose and manage hypertension and helps patients take an active role in the process.

Compared to routine office BPs, SMBP more accurately represents a patient's BP and can better predict future cardiovascular events. Additionally, there is **strong evidence** that using SMBP in conjunction with clinical support and co-interventions is more effective than usual care in lowering BP and improving control among patients with hypertension.

**1**

#### **Assess how your health care organization currently uses SMBP.**

It is important to understand how you and your health care organization currently use SMBP in order to identify ways to improve.



Use the **SMBP Pre-assessment tool** to help establish a baseline.

## 2

### Build your health care organization's knowledge in SMBP.



Review the **Patient-Measured BP** section of the Target: BP website.



Watch these webinars from our library to gain insights & best practices from experts and receive CME/CE credit:

- **Using SMBP to Diagnose & Manage HBP**
- **Scientific Statement on BP Measurement**
- **Improving BP Control Through Policy**



Review this **CPT code one-pager** to learn about new CPT codes to cover SMBP.



3

Consider developing an SMBP loaner device program. *(optional)*



SMBP Loaner  
Device Agreement\*



Device Inventory  
Management

4

Provide care teams with resources to confirm **SMBP device validation** and check device accuracy for patients, train patients on proper SMBP techniques and average SMBP measurements for provider interpretation.



Device Accuracy Test



Patient Training  
Checklist



Patient Training  
Checklist for Loaner  
Devices *(optional)*



SMBP Average  
Calculator

5

**Set your patients up for success with resources to educate them on how to properly perform SMBP monitoring and record SMBP measurements.**



**What is SMBP?**



**SMBP Training Video\***



**SMBP Infographic\***



**SMBP Recording Log**

*AMA MAP BP™ provides health care organizations with tools and resources to help ensure out-of-office blood pressure measurements are performed in accordance with the latest evidence-based clinical guidance.*

# Patient Identification



## Patient Criteria

- Patients with uncontrolled hypertension (HTN)
- Patients newly diagnosed with HTN
- Undiagnosed HTN (white coat syndrome) with BP >130/80
- Patients with health-related social needs
- Patients identified as high risk



## Patient Identification

- Patients identified in CMS 165 (NQF 0018) Controlling High Blood Pressure report
- Diagnosis codes for HTN on EHR problem lists
- Current use of medications for BP control
- Risk stratification algorithms in EHR that identify patients in high risk or raising risk categories
- Care team input

# What can you do to improve patient engagement in SMBP?

1. **Open ended questions:** Discover what the patient thinks is important.
2. **Reflective listening:** Ask for clarification to get a better understanding of what the patient is saying.
3. **Positive reinforcement:** Encourage healthy ideas.
4. **Ask-provide-ask:** Ask what they already know, give a brief answer that fills in the gaps, and then ask for their thoughts.
5. **Teach back:** Ask patients to tell you what they took away from the conversation.
6. **Collaborative goal setting:** Help patients create realistic, achievable and personally meaningful action plans considering patient's readiness, confidence and perceived barriers. Assess the patient's family/caregiver support system
7. **Follow-up:** Agree on a time to follow up to monitor progress.

“

When your patients understand that you are interested in their struggles with high blood pressure and in their perspective on the matter, they are much more likely to be interested in what you have to say and to be open and interested in self managing their high blood pressure. ”

# Educate Patients

## How to measure your blood pressure at home

Follow these steps for an accurate blood pressure reading

### 1 PREPARE

Avoid caffeine, cigarettes and other stimulants 30 minutes before you measure your blood pressure.

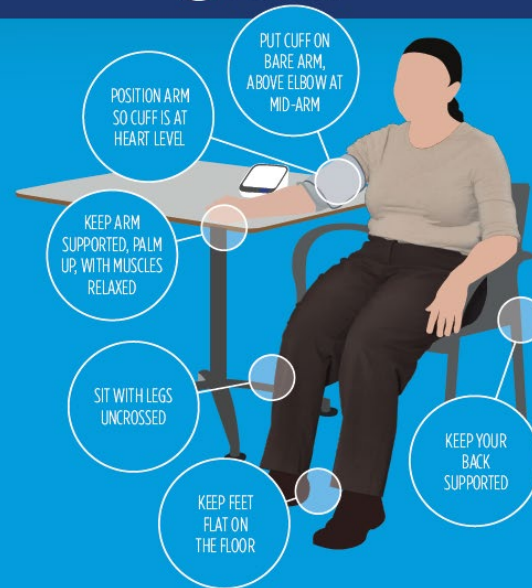
Wait at least 30 minutes after a meal.

If you're on blood pressure medication, measure your BP **before** you take your medication.

Empty your bladder beforehand.

Find a quiet space where you can sit comfortably without distraction.

### 2 POSITION



### 3 MEASURE

Rest for five minutes while in position before starting.

Take two or three measurements, one minute apart.

Keep your body relaxed and in position during measurements.

Sit quietly with no distractions during measurements—avoid conversations, TV, phones and other devices.

Record your measurements when finished.

TARGET:BP™



Educate patient on accurate BP measurement using their own validated device or a loaner device from your practice.

# Patient Performs SMBP



Best practice recommends patient measure BP each morning and evening for seven consecutive days.



At each measurement, two BPs are obtained one minute apart.



For patients with existing HTN diagnosis, SMBP should be performed two weeks after new medication started or a medication change.



Minimum three days of consecutive measurement is acceptable.



Patients should use a data collection log to record their readings.

# Receive Patient Data

FOR OFFICE USE

Self-measured blood pressure SMBP Average Calculator													
Patient Name:													
Patient ID:													
Day	SMBP Date	MORNING						EVENING					
		Reading 1			Reading 2			Reading 1			Reading 2		
		Systolic	Diastolic	Comments	Systolic	Diastolic	Comments	Systolic	Diastolic	Comments	Systolic	Diastolic	Comments
1													
2													
3													
4													
5													
6													
7													
Average:		0	0		0	0		0	0		0	0	
Total average:		0	0										

- After the seven days, patients will need to return data to your office.
- Once data is received use the SMBP Average Calculator to determine the SMBP average for the week:

[https://targetbp.org/tools\\_downloads/7-day-recording-log-template/](https://targetbp.org/tools_downloads/7-day-recording-log-template/)



# Interpret Results

Use this chart to reconcile in-office BP and SMBP measurements to classify and manage patients.

In-office BP	SMBP	Classification	Management
Less than 120/80	Less than 120/80	Normal blood pressure	Recheck BP in office in one year
120-129/ less than 80	120-129/ less than 80	Elevated BP	Healthy lifestyle changes and recheck SMBP every 3-6 months
Less than 130/80	Greater than or equal to 130/80	Masked hypertension	Manage as sustained hypertension due to increased CV risk or consider 24-hour ABPM
Greater than or equal to 130/80	Less than 130/80	White coat hypertension	Recheck SMBP every six months
Greater than or equal to 130/80	120-129/ less than 80	White coat hypertension + elevated BP	Healthy lifestyle changes and recheck SMBP every 3-6 months
Greater than or equal to 130/80	Greater than or equal to 130/80	Sustained hypertension	Manage per current hypertension guideline recommendations

# SMBP CMS Billing

## CPT Code

99473

SMBP using a device validated for clinical accuracy, patient/education training and device calibration. Can be submitted once per device.

99474

30-day period program, minimum of 12 readings, two readings at least one minute apart per day. Data can be collected by patient or caregiver and reported to physician or another professional. Average must be reported in treatment plan.

Must have two readings one minute apart, twice daily

Minimum of 12 readings over a 30-day period

Staff must average the readings and document in the EHR

Can be submitted by the patient electronically or in person AND in subsequent communication of treatment plan back to patient/caregiver

# Measure Your SMBP Progress



## Clinical quality measures (CQMs)

- CMS165 (NQF 0018, MIPS Quality ID 236) - Controlling High Blood Pressure: Percentage of patients 18-85 years of age who had a diagnosis of HTN and whose blood pressure was adequately controlled (<140/90mmHg) during the measurement period



## Manually tracked metrics

- SMBP: Number of patients in the program
- SMBP: Number of patients in SMBP with BP controlled (<140/90 or <130/80)
- Average improvement of patients in SMBP over time



**Mountain-Pacific**  
*Quality Health*

# **PRACTICE PRESENTATION AND Q&A**

# Wyoming Practice Presenters

**Tiffany Calvetti**, Medical Records & Referral Coordinator,  
HTN Grant Program Coordinator, COVID-19 Vaccine Clinic Coordinator



- **Location:** Cheyenne, WY
- **Practitioners:** Four
- **SMBP Panel size:** 15
- **EHR:** eClinicalWorks

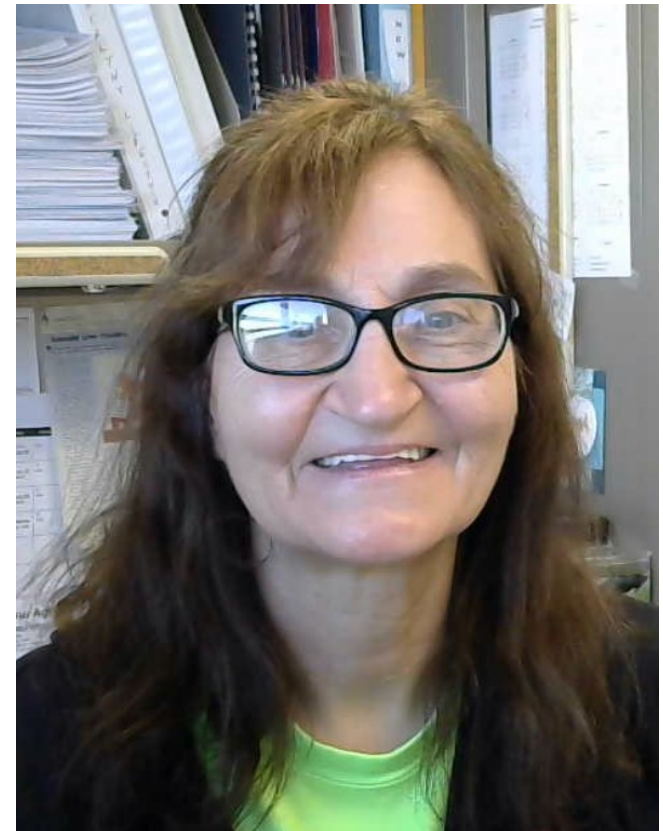


# Montana Practice Presenters

**Susan Morgan**, Director of Clinical Nursing



- **Location:** Northern Montana Health Care, Havre MT
- **Practitioners:** 14
- **SMBP Panel size:** 250
- **EHR:** Meditech





**Mountain-Pacific**  
*Quality Health*

# GROUP DISCUSSION

# Discussion Question 1



**In your experience implementing SMBP, what are the most important factors for success?**



## Discussion Question 2



**What strategies and tactics are most effective to maintain patient engagement with SMBP?**

## Poll #3

What additional education or support would you like to receive around SMBP? (choose all that apply)

- Workflows and staff training
- Billing and reimbursement
- Patient engagement and self-management
- BP equipment and EHR
- Peer-to-peer networking for best practices
- An Affinity Group (implementing SMBP from start to finish with a group of other practices)

# SMBP Leaving in Action



## Explore

- Establish organizational buy-in and identify an SMBP champion
- Review the pre-implementation steps and establish an approach



## Learn

- Review resources and reach out to subject matter experts
- Reach out to your Mountain-Pacific representative to engage in more learning opportunities



## Network

- [Join the SMBP Affinity Group!](#)

# Tools and Resources

- [Target BP](#)
- [Implement SMBP](#)
- [Foundation of Community Health Workers](#)
- California Health Care Foundation: [Helping Patients Manage Their Chronic Conditions](#)
- Join the Million Hearts [SMBP Forum](#)
- Join the Million Hearts [Online Community](#)

# Regional Chronic Disease Collaborative



## Mission

- A regional approach to prevent the development and progression of and improve outcomes for CVD, Diabetes, CKD and related conditions
- Utilize a Learning and Action Network (LAN) to deliver content to healthcare systems and communities in our region
- Current Members:
  - Alaska Department of Health
  - American Heart Association
  - Hawaii Department of Health
  - Montana Department of Health
  - Montana Primary Care Association
  - Mountain-Pacific Quality Health
  - Wyoming Department of Health

# Poll #4

- What additional education would you like to receive on the management of chronic disease? (choose all that apply)
- Clinical overview of CVD, diabetes and chronic kidney disease
- Protocols/care guidelines and workflows
- Identifying high risk patients or gaps in care
- Lifestyle programs and other community resources
- Use of data, data analytics and EHR and other HIT functionality
- Increasing patient/family engagement and self management
- Health equity and accessibility
- Social determinates of health

# Thank You!

Contact us for assistance implementing your  
SMBP program.

MPQH

Kristen Schuster  
[kschuster@mpghf.org](mailto:kschuster@mpghf.org)  
406-871-6031

AHA

Jessica Newmyer  
[Jessica.newmyer@heart.org](mailto:Jessica.newmyer@heart.org)  
619-332-0110