The MHA and MC LAN Cuff Kit™ Project

Frequently Asked Questions

Revised February 22, 2023

Who is included in the at-risk and vulnerable population category?

At-risk and vulnerable birthing people are defined as those with chronic hypertension, history of preeclampsia and/or eclampsia, obesity, advanced maternal age, autoimmune disorders, and other medical diagnoses, as well as population-level risk factors such as race (Black, Native American, Hispanic) and/or rural location, and patients adversely impacted by SDOH. This also includes those with a lower ability to procure their own BP cuff.

What are the data components of this project?

There are three key pieces of data for this project.

1) CPT Code: Everytime a Cuff Kit™ is distributed, the CPT code **'99473'** should be submitted as a claim. This claim is only to be entered once per patient. If your organization does not submit claims, please reach out to silvernalej@uchicago.edu and an alternative data tracking method can be arranged.

2) Provider Survey: Every month, you are required to submit an online survey distributed by the Preeclampsia Foundation. It collects information on your inventory of Cuff Kits™ and demographic information on the patients who have received a kit. To help you keep track of Cuff Kit™ recipients, the Preeclampsia Foundation has developed an excel worksheet that your organization can use internally to monitor the distribution of your kits. Please do not share this tracking spreadsheet with us (only submit data via the online monthly survey).

3) Patient survey: In every Cuff Kit™, there is a postcard advertising an SMS survey that is available to your patients/clients. The survey is a short 7 questions, and each respondent receives a $25 gift card to a vendor of their choice (Amazon, Visa Gift Card, Starbucks, Walmart, and many more). Each Cuff Kit™ contains a postcard that includes a phone number and keyword to text in. This survey helps us learn more about the utilization of the Cuff Kit™ and how it impacts patient's feelings of empowerment and agency in their healthcare decisions. Please **highly encourage** your patients to take this survey as it is a valuable part of the program.

What if I see a charge associated with the 99473 CPT code when submitting the claim?
Some organizations may see a charge associated with the **99473** CPT code. If this is the case, please reach out to your billing/accounting department and request to write off the charge. No patient should be charged for receiving a Cuff Kit™. If a charge is required to submit the claim, some facilities have altered the charge to be one penny. If you continue to have difficulty with entering the CPT code, please contact silvernalej@uchicago.edu

When/what are the Cuff Kit™ Connection meetings?
The Cuff Kit™ connection meetings are an opportunity for providers participating in the Cuff Kit™ program across Missouri to meet and ask questions, share advice, and learn from one another. At every meeting, a Preeclampsia Foundation representative and a research team member will be present to answer any questions. The meetings are every third Wednesday of the month at 3pm CST. The Zoom link is here.

When should the provider surveys be submitted?
Respond to the online survey between the 20th - 25th of each month (reporting periods run from your previous report, generally the 21st of the month, to the 20th of the following month).

What if we have multiple NPIs at our clinic distributing Cuff Kits?
If multiple providers are distributing Cuff Kits™ at your clinic, your clinic will need to submit a unique Provider Survey monthly for *each* NPI (e.g., five physicians/nurses NPIs are distributing Cuff Kits™, five surveys should be submitted to PF). These NPIs should have been recorded in the program application.

Are patients expected to return the BP kits once they are finished with them?
No, patients are not expected to return the kits after they are finished using them. Patients should be encouraged to continue to monitor their BP, as deemed appropriate by their care provider, especially during postpartum through one-year after birth.

How will the data from the project be used?
MHA will partner with Harvard University Kennedy School of Government, University of Chicago Booth School of Business, and the Preeclampsia Foundation to leverage the data set collected for the Cuff Kit™ Project and additional publicly available data sets to study the efficacy and return on investment of home BP monitoring kits. Special attention will be given to studying variables related to health equity and provision of resources to marginalized populations. Missouri Cuff Kit™ recipients will inform a significant subset of the total data set from Preeclampsia Foundation. Outcomes of this research may support further fiscal support of self-monitored BP, identified policy changes and reimbursement/payment model inclusion; hence, data collection by lottery recipients is critical to this work.

Would you need internet or broadband?
To transmit the BP data to the provider or to use the digital app, internet access is required; however, each kit comes with paper log forms which may be used to track BPs and shared with providers or reviewed during a phone call with the patient/client if internet access is limited or not available. The compensated patient survey does not require internet and is distributed via text messages from a toll-free phone number.

Are the cuffs easy to use for patients with low literacy levels?
Yes, the Cuff Kit™ education materials were prepared at low literacy levels. Here is a video that demonstrates proper BP cuff usage.

If we are distributing Cuff Kits™ on the inpatient labor and delivery unit, OB triage and clinics all within the same healthcare system, is the staff who is distributing the Cuff Kits™ also responsible for the reporting out based on location or should it all be reported in one group for the system?
It depends on how you applied for the Cuff Kit™. Each applicant has accountability for distributing Cuff Kits™ to their at-risk, vulnerable patient population and reporting the data set for those patients. Coordination across settings may be required to obtain all data elements.

How does the Bluetooth reporting work? Is it easy for the patient to do?
Yes, it is easy for patients to use the Bluetooth reporting. The Bluetooth and mobile app work automatically once the app is downloaded.

Does the mobile app send the BPs to the provider's office? Or is there a portal that can be accessed to read them?
The mobile app will only send the BPs to the provider if the provider's office has integrated it into their electronic medical records system. Epic has completed integration, and the API information is available through iHealth if providers want to set up integration. A pilot site is current testing this method and instructions will be communicated more broadly once completed. Regardless, if the patient is using the mobile phone app, they can export their data as a CSV, XLS or PDF to share with their provider.

Who do I contact if I have a question about the kits or collecting or reporting data?
Please contact Carrie MacMillan at cuffkits@preeclampsia.org

Who do I contact if I have questions about the CPT coding process?
Please contact Nettie Silvernale at silvernalej@uchicago.edu or Anne Fogarty at afogarty@hks.harvard.edu

Who do I contact if I have questions about the MHA grant or the program overall?
Please contact Sherry Buschjost at sbuschjost@mhanet.com.