

Cuff Kit[™] Connection

Monthly Technical Assistance and Peer Learning April 19, 2023

Valerie Holloway, Managing Director Carrie MacMillan, Project Coordinator







- Reminders
- Data Reporting
- "Teach Back" Patient Education
- Distribution
- Best Practices
- Blood Pressure Monitor Discrepancies
- Group Discussion Q & A



Project Goals



- Empower patients to recognize and report signs and symptoms
- Educate patients and families on accurate self-measured blood pressure (SMBP)
- Support reduction of noted **disparities** and COVID-19 effects
- Support outpatient monitoring and management of blood pressure
- Collect data to demonstrate efficacy and cost effectiveness
 - Diagnosis and management processes
 - Prenatal and postpartum care
 - Payor coverage



Program Implementation Timeline MISSOURI HOSPITAL ASSOCIATION Training webinar Respond to online survey All Kits and receipt of between the 20th - 25th of distributed implementation each month (reporting to patients checklist periods run from the 21st to the 20th of every month) **Submit Survey Receive Cuff** March 20 – 25 Kit shipment **Submit Survey** Submit Survey **Submit Survey** May 20 – 25 **April 20 – 25 February 20 – 25** May 31, 2023 **Submit Survey January 20 – 25** Attend monthly Cuff Kit[™] Connection with MHA (3rd Wednesday of each month at 3pm CT) January 18, 2023 **January 18, 2023** February 15, 2023 December 2022 March 15, 2023 December 1, 2022 April 19, 2023 May 17, 2023



Timeline Additions

- Monthly Cuff Kit Connection Webinars
 Extended
 - 。 3rd Wednesday of each month at 3pm CT
 - Continued through December 2023
- Monthly RedCap Survey Extended
 - Continued through December 2023





Alternative translations of Cuff **Kit educational materials:**

- Welcome Letter
- Preeclampsia Signs & Symptoms
- Postpartum Preeclampsia Signs • & Symptoms
- Blood pressure log
- How to take your blood pressure • infographic

Weli waxa

Dhaln

Additional language translations:

Arabic, Burmese, Kirundi, Pashto, Somali, Swahili, and Ukrainian, plus current Spanish and English

9		သင့်သွေးစ	ပါင်ချိန်- စစ်ပါ • သိထားပါ • မျှဝေပါ	
فه پوښتنه وکړئ	له خپلی ډاکترې يا قابلی څ	မိခင်တစ်ဦး၏ သွေးပေါင်ချိန်သည် ကိုယ်ဝ ကိုယ်ဝန်ဆောင်ချိန်အတွင်း သွေးပေါင်ချိန် သည်၊ ထို့ပြင် ကိုယ်ဝန်ဆောင်ချိန်အတွင်းန	န်ခဏာင်ရှိန်နှင့် ကလေးမွေးပြီးနောက်တွင် အရေးကြီးသော ထို သည် သင့်ကိုယ်ဝန်ကို မည်ကဲ့သို့ ဗီမံနေ့ခွဲပုံကို ရုံးဖြတ်ပေးသည် ငှ် ကိုယ်ဝန်စစာင်ပြီးနောက်မကြာမီကာလအတွင်း ကိုယ်ဝန်စိပ် ဘွက် ဖြစ်နိုင်ဖြေ အန္တရာယ်များနှင့် ထပ်တိုးဝေဒနာများကို အရူး	မီးဖွားရှိန်ကို အသိပေး တက်စြင်းနှင့် HELLP
بسبا	يريايكلاه	အိမ်တွင် သင့်သွေးပေါင်ရိန်ကို စစ်ပါ		
* *	* *	အနည်းဆုံး တစ်နေ့လျှင် 2 ကြိမ် တိုင်းပေးပါ- (နက်တစ်ကြိမ်နှင့် ညတစ်ကြိမ် တိုင်းပေးပါ။ ရလဒ်အားလုံးကို မှတ်တမ်းတ	ວຣົບໃຫ
	دا څه شنی دي؟		သင့်သွေးပေါင်ချိန်ကို သင်မတိုင်းခင် TES (ကြီးဖြစ်နိုင်) နိုင်ငံတ	
چا ته د مېندراری په دريمه ميملي کې، ا	یری ایکلامینیا د وینی د قدار ایرده جدی دارد می در دا فر یا له زیرون شمه رروسته تر 6 اونی بوری بیدا کبدای شی.	သန့်စင်စန်းသို့သွားပါ	1.52.102.0203.31.3 2.110-	
ماشوم ته خطرونه معنی دی _د ون رو مرون	Amabwiriza no Izina ry'iwawe:	 သင့်လက်မောင်းကို သင့်နှလုံးခာပြင့်နေရာတွင် ရေ 		
s —	Raba 2 ku munsi: kimwe mu n'ikigo wivurizako. Andika in	နားတွင် ထားပ။ • စြေထောက်များကို ကန့်လန့်ဖြတ်မထားဘဲ ကြမ်။ • လက်ရည်းကို သင့်လက်မောင်း ပတ်လည်တွင် တင်	ر ≪Cuff Kit لقاس متحدً الدر في المدر ل	تهانيا بندان تولى المسؤولية عن مستقادا بحن سحاء للغابة لمساعتك من خلال تقديم مبعم عة طوق معصد
سردرد	gende to deno egende systolic/distolic / / /	 START (စတင်မည်၊ ကို နိုင်ပါ။ လည်စည် ထော ကို ညှစ်ပါမည်၊ ထိုနောက် စေလော့ဘူဘားမည်။ ပြောပါနှင့် ခြင်ခြင်နေကြ သက်သောင့်သက်သား သင့်နံပါတ်မှားကို တစ်နေ့လျှင် နစ်ကြိမ် ရေမှတ် 	. إن مقدمات الارتعاج هي مشكلة طبية خطيرة تتعلق	يُد منط دماة مؤشرًا منطًا ها في أثناء مرحلة المل ويدها بمنعط الدم المرتقع الذي يمكن أن يحدث في أي وقت بند مرور را أقسى بند أن تنجين.
		သင့်သွေးပေါင် ရျိန်ကို သိထားပါ အပေါ် သူး BP (အပေါ်နံပါတ်)		إليك ما سوف تجدينه في المجموعة:
د نەر لىل بە اربى تى نە 5 يونتو (3.2 علو قرام) خدە بىر اچستان		140 ဆေးကိ 140 မှ 159 160 သို့မဟုတ် ဆိုအဆက် သင့် သွေးပေါင် ရှိနိုးကို မျှစဝပါ • ဗီးဟူး၊ဗီနှင့် ဗီးဂူးပြီးနောက်ပိုင်း ရက်ရှိန်း • အဝါ သို့မဟုတ် အနီရောင်နန် နံပါတ်ဖွားအာ	— حتى بد أن تنجبى، ربعا تتعر حين للإصابة بتسفط التم , السوار انتكر، مقتمى خدمات الرعاية المستية وتتكير نضك مؤنه المستيه للأمهات مثلك من خلال إرسالها مره أخرى إلينا	 جهاز لقراب منخذ الدم بشكل تلقائي. مطومات بشأن كيفية مجاس منخط نعاة بشكل محتج وسجل علمات مقدمات الارتعاج راحراسه. علمات مقدات الارتعاج راحراسه. سوار العبيه الذي يشور إلى الله "لا الإن موسف المطر". سوار العبيه الذي يحد إلى الله "لا الإن مرسة المطر". سوار العبيه الذي معدم المحاج لردي راحل الدي معدم المحاج لردي راحل الدي معدم المحاج المحاح المحاج المحاح المحاح
		© 2020 Preeclampsia Foundation	M أو إجراء المنح الضوئي للاطلاع على فينيو تطيمي، ن ضغط الدم والحمل. إنك تبدئين ممارسة عادات سوف.	يرجى زباره ww.preeclampsia.org/blood-pressure وتقريل سجانت إضافية، والتعرّف على المزيد من المعلومات يتما تؤهلك إلى حياه طويلة عامره بالمعارسات الصنعية الجيده.
Taxay tah مراجعه وکړي halmada ka dib t udur khatar ah oo la xidhiidha dhiig karka.	Ni gute woronka ubufasha i	(andika umwidondoro har	لأن فصناعدًا.	يسعدنا أن ترافقك في هذه الرحلة. يرجى اعتبارنا موردًا لك من ا
udur khatar ah oo la xidhiidha dhiig karka. Yaxay ku dhici kartaa haweenay kasta oo mo dhashay ilaa 6 todobaad ka dib marka u ilmahu dhasho. Khatar ku ah Adiga 9 Suuxdinta • Waxyeelada xubin jidhka ah Faaliga • Dhimashada	www.p	idewo yo kwigisha, n'ibindi bikores preeclampsia.org/blood-pressure.		Preeclampsia Foundation www.preeclampsia.org info@preeclampsia.org (800) 665-9341
Maxaad samayn kartaa? • Waydii haddii aad la soconayso dhakhtarka hal todobaad gudaheed oo ka bixida ah. Ilaali dhammaan ballama la socodka ah.	IVYO UTOKWACIRIZA IBITARO: hji porogarama, ji yakuvuge. Uowita bivibipimo bifative en ungo b harinwo n'nyo ukeneye mu buvuzi biviwaee. Nji turaguavey aga n'umuhinga mu buvuzi ako kan hamagara 911 canke uhamagare ako kamwanya u	bifatiye ku kungene n'ibikoresho. Hora uyaga imba ufise canke ukenze ko woba ufite itati mwanya. Nimba uri muri leta zunze kumwe z	امىت الرمز ضوئيًا www.preciampsiaorg	
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opyright ©2018-2021 Preeclampsia Foundation. Dha	mmaan xuquuqahu way dhowran yihiin La daaba	acay 7/21.		

Required Patient CPT Codes

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99473

CPT

PREECLAMPSIA

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THE UNIVERSITY OF CHICAGO



All patients receiving a Cuff Kit™ must have the 99473 CPT code entered in the EHR. Administrative data will be pulled for analysis based on the use of this CPT code. Submit the code as a claim to Medicaid or the patient's insurance payor.

CPT code 99474 can also be used.







CPT Code 99473



- Every time a CuffKit[™] is distributed, the CPT code '99473' should be submitted as a claim. This claim is only to be entered **once per patient**
- No patient should be charged for receiving a CuffKit[™]. If you see a charge to the patient, please reach out to your billing department to resolve. For example, some facilities' billing departments have altered the claim to be one penny.
- MO HealthNet stated that the claim **should be reimbursed under Medicaid**
- If you continue to have difficulty with entering the CPT code, please contact silvernalej@uchicago.edu
- If your organization does not submit claims, please reach out to <u>silvernalej@uchicago.edu</u> and an alternative data tracking method can be arranged





SCAN ME





Organizations and individual providers will need to ensure they meet the following criteria to participate.

- utilize some form of telehealth capabilities to communicate with participating patients and closely monitor blood pressures (BP) through cuff kit usage (text messages, phone calls and video chats are examples, along with more sophisticated telehealth technologies)
- provide patients with the entire cuff kit package and educate on the contents and accurate BP monitoring
- prioritize distribution to those at highest risk, especially vulnerable birthing persons with a lower

https://web.mhanet.com/wpcontent/uploads/2023/02/Cuff-Kit-FAQs_revised-02222023.pdf





Data Reporting

- Monthly Cuff Kit Connection Webinars
 Extended
 - 。 3rd Wednesday of each month at 3pm CT
 - Continued through December 2023
- Monthly RedCap Survey Extended
 - Continued through December 2023





Data Reporting

What to report and when

- Inventory Monthly Survey
- Distribution Monthly Survey
- De-identified patient information Once the patient has reach 6 weeks postpartum, Monthly Survey



Patient Education



- Review Contents: Welcome Letter, Signs and Symptoms, Participant postcard, Wristband, Logs, Monitor, and Cuff
- Demonstrate how to take proper blood pressure
- Review mechanisms for how to record/log patient BP*
- Have patient demonstrate proper use
- Use "teach back" to ensure understanding of all contents and their uses
- All materials in English and Spanish

* Take/send a picture of your log; bring paper copy with you to appointment

** Show results on app; email or text results



Distribution to Patients



- WHO: At-risk and vulnerable pregnant and postpartum women
 - Chronic hypertension
 - History of preeclampsia and/or eclampsia
 - Obesity
 - Advanced maternal age (35+)
 - Autoimmune disorders and other medical comorbidities
 - Racial/ethnicity (Black, Native American) and/or rural location
 - Potentially affected by Social Determinants of Health
- WHEN: Any of three pregnancy trimesters (preferably 20+ weeks) or at discharge following birth of baby



Best Practices



Tara Gardner-Dino

Mercy Clinic Maternal Fetal Medicine

Thank you, Tara, for sharing your feedback and best practices.





Blood Pressure Monitor Discrepancies (1 of 2)



Procedure

Before testing, measure the circumference of the test subject's upper arm and check that it is within the rated size of the iHealth blood pressure cuff (as printed on the cuff, a metricimperial conversion might be needed). If the test subject's upper arm circumference is larger or smaller than the cuff's rated size range, use an appropriate cuff sold by iHealth Labs for the specific device model.

1. Have the test subject empty their bladder before sitting comfortably at a table/desk in a chair with back support. They should relax quietly for 5 minutes before taking the first measurement and avoid eating, drinking, smoking, and exercising for 30 minutes before measuring.

*Please reach out to <u>cuffkit@preeclampsia.org</u> with any confirmed discrepancies



Blood Pressure Monitor Discrepancies (2 of 2)



2. Measure the blood pressure of the subject by following the below order:

- i. Mercury sphygmomanometer
- ii. Wait for one minute, then iHealth Blood Pressure Monitor
 - Wrap the iHealth cuff comfortably around the subject's bare upper arm without rolling up the sleeve, about 3/4 in (2cm) above the inside of the elbow joint. One finger should fit easily between the arm and the cuff.
 - Have the subject sit with both feet flat on the floor and back supported by the chair, hand resting on the table.
 - Press the "START/STOP" button to take a measurement. The subject should not talk, move or actively listen during measurement.
- iii. Wait for one minute, then mercury sphygmomanometer
- iv. Repeat i. and iii.
- 3. Calculate the average of the three mercury sphygmomanometer measurements and the average of the two iHealth Track readings.

If the difference between the averages is less than 10 mmHg for both systolic and diastolic pressure, it can be deemed that the iHealth blood pressure monitor is suitable for the test subject. However, if the discrepancies are consistently more than 10 mmHg for five test subjects or more, the device needs to be recalibrated and/or further tested for defects.

*Please reach out to <u>cuffkit@preeclampsia.org</u> with any confirmed discrepancies





Group Discussion

Q & A

Contact us at <u>cuffkit@preeclampsia.org</u> or (321) 421-6957 for more information





Contact Information



MHA

Alison Williams Vice President of Clinical Quality Improvement <u>awilliams@mhanet.com</u> (573) 893-3700, ext. 1326

Sherry Buschjost Vice President of Quality Services <u>sbuschjost@mhanet.com</u> (573) 893-3700, ext. 1369

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Cuff KitTM Connection with MHA

Cuff Kit™ Connection meetings will be held on the **3rd Wednesday** of each month at **3 PM CST/4 PM EST**.

All **Project and Data Leads are encouraged to attend** and invite anyone connected to the program from their location. January 18, 2023 February 15, 2023 March 15, 2023 April 19, 2023 May 17, 2023

