

The Department of Vermont Health Access Medical Policy

Subject: Pulse Oximeter for Home Use

Last Review: January 1, 2020*

Past Revisions: December 30, 2015, January 2, 2015, September 12, 2012, April 27, 2011, September 16, 2010, and October 15, 2006

***Please note: Most current content changes will be highlighted in yellow.**

Description of Service or Procedure

Pulse Oximeter measures the oxygen saturation (oxyhemoglobin) by using wavelengths of light via a noninvasive probe. The probe can be attached to a finger, toe, or earlobe. A wire leading to the monitor shows the measurement and sounds an alarm if it is in an abnormal range.

The use of a Pulse Oximeter is considered safe but has some limitations. False-negative and false positive results for both hypoxemia and normoxemia may lead to inappropriate treatment of an individual. In addition, tissue injury may occur at the site of the probe, because of inappropriate use of the device (e.g. pressure sores from prolonged application or electric shock and burns from the substitution of incompatible probes between instruments).

Maintain Skin Integrity by changing the sensor site frequently (every 2-4 hours) and avoid prolonged skin contact. Ensure the wrapping is not too tight around the end of the digit being used for monitoring. Avoid using wrapping that is not approved for use with oximeter probe. The site should be assessed each time the site is changed.

Pulse oximeter is a capped rental item.

- E0445 NU spot check oximeter one-time purchase
- E0445 RR spot check oximeter paid in 10-monthly installments
- E0445 TGRR is a capped rental item and is paid in 10-monthly installments
- A4606 oxygen probe for use with oximeter device (disposable), replacement allow 6 per month
- A4606 oxygen probe for use with oximeter device (non-disposable), replacement allow 1 per year. Request Enhanced Pricing.
- A9999 Probe Tape for Oximeter allow 15 per month



Disclaimer

Coverage is limited to that outlined in Medicaid Rule that pertains to the member's aid category. Prior Authorization (PA) is only valid if the member is eligible for the applicable item or service on the date of service.

Medicaid Rule

[7102.2](#) Prior Authorization Determination

[7103](#) Medical Necessity

Medicaid Rules can be found at <http://humanservices.vermont.gov/on-line-rules>

Coverage Position

A pulse oximeter may be covered for beneficiaries:

- When the pulse oximeter is prescribed by a licensed medical provider, enrolled in the Vermont Medicaid program, operating within their scope of practice in accordance with the Vermont State Practice Act, who is knowledgeable in the use of pulse oximeter and who provides medical care to the beneficiary. AND
- When the clinical criteria below are met.

Coverage Criteria

A pulse oximeter for home use may be covered:

Intermittent or short term (NU or RR):

- To determine the appropriate home oxygen requirement for ambulation, exercise, and sleep OR
- To determine the appropriate home oxygen level for beneficiaries with neuromuscular disease involving respiration muscles, with chronic lung disease, or with severe cardiopulmonary disease OR
- For beneficiaries being weaned from home oxygen OR
- For periodically checking oxygen saturation levels in beneficiaries using long term oxygen therapy OR
- For infants less than 12 months of age using home oxygen OR
- For a change in the beneficiary's physical condition requiring an adjustment in the liter flow of their home oxygen

And

- A trained caregiver is available to respond to changes in oxygen saturation.

Continuous or long term (TGRR):

- For beneficiaries that require mechanical ventilation OR
- For beneficiaries with a tracheostomy OR
- For beneficiaries born premature, newborn, or an infant less than 12 months of age requiring ongoing therapy for apnea OR
- For medical need to maintain oxygen saturation within a very narrow range OR
- For infants with chronic lung disease (for example, bronchopulmonary dysplasia (BPD)) OR

- For beneficiaries with spinal muscular atrophy (SMA) OR
- For beneficiaries with congenital central hypoventilation syndrome (CCHS)

And

- A trained caregiver is available to respond to changes in oxygen saturation.

Vendor Responsibilities

The vendor will be responsible for expert oversight of the equipment:

- The vendor will have their Respiratory Therapist (RT) visit the beneficiary while still in the hospital and/or once the beneficiary is at home, at time of delivery of the oximeter (except for the spot oximeter) to: set-up, instruct in proper use, alarms, and other features and to review emergency procedure should the equipment fail.
- A follow-up visit by the RT will be repeated in 7 days and then every 3 months if the equipment is needed and remains in the home. These visits should be documented and kept in the beneficiary's file at the vendor's facility.
- The vendor will instruct those beneficiaries and/or caregiver, when a spot oximeter is purchased, in the proper care and storage, the correct use, and warranty information.
- The vendor will also instruct the beneficiary and/or caregiver *not to* throw the oximeter away if s/he no longer needs it.
- Vermont Medicaid may request a 60 day download when extension of a pulse oximeter with downloadable memory is available, please make this information available with replacement requests of E0445TGRR.

Provider Responsibilities

The Provider will be responsible:

- To develop and instruct the primary care person in the plan of care as it relates to the oximeter and responses to low readings.
- When ordering a pulse oximeter with alarm capability, specific monitoring parameters should be present in documentation as well as any interventions that are performed when the member is outside of ordered parameters.

Early and Periodic Screening, Diagnostic and Treatment (EPSDT) exception: Vermont Medicaid will provide comprehensive services and furnish all Medicaid coverable, appropriate, and medically necessary services needed to correct and ameliorate health conditions for Medicaid members under age 21.

Clinical guidelines for repeat service or procedure

Useful life is 1 per 5 years

Type of service or procedure covered

Pulse oximeter and related supplies

Type of service or procedure not covered (this list may not be all inclusive)

- Asthma management
- Sudden Infant Death Syndrome (SIDS) monitoring
- When used as a screening/testing technique for suspected sleep apnea.

References

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