



MASSACHUSETTS

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Medical Policy Home Uterine Activity Monitoring

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Policy Number: 043

BCBSA Reference Number: 4.01.09A (For Plans internal use only)
NCD/LCD: N/A

Related Policies

None

Policy

Commercial Members: Managed Care (HMO and POS), PPO, and Indemnity Medicare HMO BlueSM and Medicare PPO BlueSM Members

Home uterine activity monitoring through a monitoring device and/or daily nursing contact is **NOT MEDICALLY NECESSARY**.

Prior Authorization Information

Inpatient

- For services described in this policy, precertification/preauthorization **IS REQUIRED** for all products if the procedure is performed **inpatient**.

Outpatient

- For services described in this policy, see below for products where prior authorization **might be required** if the procedure is performed **outpatient**.

| | Outpatient |
|---------------------------------------|---------------------------------------|
| Commercial Managed Care (HMO and POS) | This is not a covered service. |
| Commercial PPO and Indemnity | This is not a covered service. |
| Medicare HMO Blue SM | This is not a covered service. |
| Medicare PPO Blue SM | This is not a covered service. |

CPT Codes / HCPCS Codes / ICD Codes

Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage as it applies to an individual member.

Providers should report all services using the most up-to-date industry-standard procedure, revenue, and diagnosis codes, including modifiers where applicable.

The following codes are included below for informational purposes only; this is not an all-inclusive list.

The following CPT and HCPCS codes are considered not medically necessary for **Commercial Members: Managed Care (HMO and POS), PPO, Indemnity, Medicare HMO Blue and Medicare PPO Blue:**

CPT Codes

| CPT codes: | Code Description |
|------------|---|
| 99500 | Home visit for prenatal monitoring and assessment to include fetal heart rate, non-stress test, uterine monitoring, and gestational diabetes monitoring |

HCPCS Codes

| HCPCS codes: | Code Description |
|--------------|--|
| S9001 | Home uterine monitor with or without associated nursing services |

Description

The home uterine activity monitor (HUAM) is a device intended to provide early detection of preterm labor (PTL) in women at high risk of developing PTL and preterm birth. The HUAM is described as an electronic system for at-home antepartum measurement of uterine contractions, data transmission by telephone to a clinical setting, and for receipt and display of the uterine contraction data at the clinic. After monitoring, the patient transmits the recordings by telephone modem link to a remote base station. Base station nurses not only facilitate transmission and analysis of the monitor tracings, but also maintain daily telephone contact with the patient to assess signs and symptoms and to provide advice and counseling.

The threshold number of uterine contractions signaling the possible onset of PTL is usually 4 to 6 per hour. If signs and symptoms are present, or the uterine activity exceeds a certain threshold, patients are instructed to empty the bladder, hydrate orally, and assume the left lateral recumbent position. The patient is also instructed to re-monitor for 1 additional hour. If uterine activity still exceeds threshold or signs and symptoms persist, the patient is instructed to see her physician immediately for a cervical examination. The cervical examination would then play a pivotal role in diagnosing whether PTL is occurring and whether to initiate tocolytic therapy.

Examples of home uterine activity monitors for the detection of pre-term labor include Fetal Assist from and the Carefone Home Uterine Activity Monitoring System from Carelink Corp. All home uterine activity monitors for the detection of pre-term labor are considered not medically necessary regardless of the commercial name, the manufacturer or FDA approval status.

Summary

There is a substantial evidence base on home uterine activity monitoring for reducing preterm birth in high-risk pregnant women. The available evidence suggests that HUAM does not improve health outcomes, and HUAM is not recommended by national organizations such as the American College of Obstetricians and Gynecologists (ACOG) and the U.S. Preventive Services Task Force. Thus, home uterine activity monitoring is considered not medically necessary.

Policy History

| Date | Action |
|--------|--|
| 3/2020 | Policy updated with literature review through March 1, 2020, no references added. Policy statements unchanged. |

| | |
|----------------|---|
| 8/2015 | Clarified coding language. |
| 11/2011-4/2012 | Medical policy ICD 10 remediation: Formatting, editing and coding updates. No changes to policy statements. |
| 9/2011 | Reviewed - Medical Policy Group - Urology, Obstetrics and Gynecology. No changes to policy statements. |
| 1/1/2011 | Updated to remove ongoing coverage and non-coverage of fetal fibronectin testing from policy #043. Fetal Fibronectin Enzyme Immunoassay is separately addressed in policy #298. |
| 10/2010 | Reviewed - Medical Policy Group - Obstetrics and Gynecology. No changes to policy statements. |
| 10/2009 | Reviewed - Medical Policy Group - Obstetrics and Gynecology. No changes to policy statements. |
| 10/2008 | Reviewed - Medical Policy Group - Obstetrics and Gynecology. No changes to policy statements. |
| 10/2007 | Reviewed - Medical Policy Group - Obstetrics and Gynecology. No changes to policy statements. |

Information Pertaining to All Blue Cross Blue Shield Medical Policies

Click on any of the following terms to access the relevant information:

[Medical Policy Terms of Use](#)

[Managed Care Guidelines](#)

[Indemnity/PPO Guidelines](#)

[Clinical Exception Process](#)

[Medical Technology Assessment Guidelines](#)

References

1. Blue Cross and Blue Shield Association Technology Evaluation Center (TEC). Home uterine activity monitoring for secondary prevention of preterm birth. TEC Assessments 1996; Volume 11, Tab 15.
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10. 10. Home uterine monitors not useful for predicting premature birth. National Institute of Child Health and Human Development. National Institute of Health. January 23, 2002. Last updated July 25, 2006. Available online at: <http://www.nichd.nih.gov/news/releases/uterine.cfm> . Last accessed September 2011.
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12. National Guideline Clearinghouse. American College of Obstetricians and Gynecologists. Management of Preterm Labor. Available online at: <http://www.guidelines.gov/content.aspx?id=3993>
Last accessed September 2011.