



Manual: IU Health Plans
Department: Utilization Management
Policy # MP018
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Health Plans

Medicare Advantage

X Commercial

Continuous Home Pulse Oximetry

I. Purpose

Indiana University Health Plans (IU Health Plans) considers clinical indications when making a medical necessity determination for Continuous Home Pulse Oximetry Policy.

II. Scope

This policy applies to all Utilization Management staff having decision making responsibilities where authorization is required for Fully Insured plans.

III. Exceptions

1. Continuous pulse oximetry performed in the home is not covered for **any of the following** indications:
 - a. For routine monitoring of an individual with oxygen (not medically appropriate)
 - b. As part of an individual's asthma management (not medically appropriate)
 - c. For management of chronic obstructive pulmonary disease (COPD)
 - d. For management of transient hypoxemic events
 - e. For screening or management of a sleep disorder (e.g., sleep apnea)
2. Continuous pulse oximetry performed in the home is not covered for **any of following** diagnoses:
 - a. G47.33, Obstructive sleep apnea (adult) (pediatric)
 - b. G47.34, Idiopathic sleep related non-obstructive alveolar hypoventilation
 - c. G47.36, Sleep related hypoventilation in conditions classified elsewhere
 - d. G47.8, Other sleep disorders
 - e. G47.9, sleep disorder, unspecified
 - f. J44.9, Chronic airway obstruction, not elsewhere classified (NEC)
 - g. J45.909-J45.998, Asthma
 - h. Z13.83, Encounter for screening for respiratory disorder NEC
3. Medicare Advantage Only - Continuous Home Pulse Oximetry will be denied as not a covered benefit.
4. Only oximetry devices approved by the Food and Drug Administration (FDA) can be utilized and approved.

IV. Definitions

Continuous pulse oximetry- Pulse oximetry measures oxygen saturation by utilizing selected wavelengths of light to noninvasively determine the saturation of oxyhemoglobin. The oximeter passes red light through the fingertip or earlobe; the amount of light that is absorbed reflects how much oxygen is in the blood. This is done by measuring light absorption of oxygenated hemoglobin and total hemoglobin in arterial blood. Pulse oximetry is considered a safe procedure but the device does have limitations that can lead to inaccurate measurements, including: motion artifact, abnormal hemoglobin, skin pigmentation, low perfusion states, nail polish and ambient light. These limitations may lead to a false negative and potentially inappropriate treatment of the individual. CONTINUOUS PULSE OXIMETRY is worn with only short breaks for cleansing and changing of equipment.

V. Policy Statements

IU Health Plans considers **Continuous Home Pulse Oximetry** medically necessary for **all of the following** indications:

1. Continuous pulse oximetry performed in the home is covered when **one of the following** indications is present:
 - a. Patients on prolonged home mechanical ventilation when the ventilator does not have a built-in pulse oximeter
 - b. Home Care patients with tracheostomies
 - c. Premature or infants under one year with bronchopulmonary dysplasia
 - d. Chronic condition with impaired ventilation (examples -but not limited too- neuromuscular disease, spinal muscular atrophy, airway abnormalities)
2. Continuous pulse oximetry performed in the home is covered when **all of the following** indications are present:
 - a. The recipient would otherwise require hospitalization solely for the purpose of continuous monitoring
 - b. The results are reliable in that setting
 - c. The patient's record documents that the oximeter is preset and self-sealed and cannot be adjusted by the patient
 - d. The device is able to provide a printout which documents an adequate number of sampling hours (a minimum of four hours should be recorded), percent of oxygen saturation and an aggregate of the results (this information must be available if requested)
 - e. A trained caregiver is available to respond to changes in oxygen saturation

Codes:

HCPCS Codes	
Code	Description
E0445	Oximeter device for measuring blood oxygen levels noninvasively
A4606	Oxygen probe for use with oximeter device, replacement
Not Covered ICD-10 Codes	
G47.33	Obstructive sleep apnea (adult) (pediatric)
G47.34	Idiopathic sleep related non-obstructive alveolar hypoventilation
G47.36	Sleep related hypoventilation in conditions classified elsewhere
G47.8	Other sleep disorders
G47.9	Sleep disorder, unspecified

J44.9	Chronic airway obstruction, not elsewhere classified (NEC)
J45.909-J45.998	Asthma
Z13.83	Encounter for screening for respiratory disorder NEC

VI. Procedures

None

VII. References/Citations

1. Buekers, J., Theunis, J., De Boever, P., Vaes, A. W., Koopman, M., Janssen, E. V., Wouters, E. F., Spruit, M. A., & Aerts, J. M. (2019). Wearable Finger Pulse Oximetry for Continuous Oxygen Saturation Measurements During Daily Home Routines of Patients With Chronic Obstructive Pulmonary Disease (COPD) Over One Week: Observational Study. *JMIR mHealth and uHealth*, 7(6), e12866. <https://doi.org/10.2196/12866>. [Wearable Finger Pulse Oximetry for Continuous Oxygen Saturation Measurements During Daily Home Routines of Patients With Chronic Obstructive Pulmonary Disease \(COPD\) Over One Week: Observational Study - PubMed \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/32675334/)
2. Centers for Medicare and Medicaid Services (CMS). Local Coverage Determination (LCD). Oxygen and Oxygen Equipment. L33797. Contractor: CGS Administrators, LLC. Revision Effective Date 4/1/2023. [LCD - Oxygen and Oxygen Equipment \(L33797\) \(cms.gov\)](https://www.cms.gov/lcds/lcd-articles/lcd-oxygen-and-oxygen-equipment-l33797)
3. Centers for Medicare and Medicaid Services (CMS). Local Coverage Determination (LCD). Oximetry Services. L35434. Revision Effective 10/17/2019. Contractor: Novitas Solutions, Inc. [LCD - Oximetry Services \(L35434\) \(cms.gov\)](https://www.cms.gov/lcds/lcd-articles/lcd-oximetry-services-l35434)
4. Chi KW, Coon ER, Destino L, Schroeder AR. Parental Perspectives on Continuous Pulse Oximetry Use in Bronchiolitis Hospitalizations. *Pediatrics*. 2020 Aug;146(2):e20200130. doi: 10.1542/peds.2020-0130. Epub 2020 Jul 16. PMID: 32675334; PMCID: PMC8758278. [Parental Perspectives on Continuous Pulse Oximetry Use in Bronchiolitis Hospitalizations - PMC \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/32675334/)

VII. Forms/Appendices

None

IX. Responsibility

Medical Director

This Policy is proprietary and confidential. No part of this Policy may be disclosed in any manner to a third party without the prior written consent of IU Health.