

Effective: 11/8/2001

Reviewed: 11/7/2011, 4/17/2012

Reviewed/No Updates: 1/28/13, 2/13/14, 2/12/15, 2/11/16,
2/9/17, 2/8/18, 2/14/19, 2/13/20, 2/11/21, 2/17/22, 2/2/23,
2/8/24, 2/20/25

PULSE OXIMETRY FOR HOME USE

Policy

VCHCP considers pulse oximeters to be durable medical equipment (DME)¹. DME is defined as equipment that serves a medical purpose, is able to withstand repeated use, and is appropriate for use in the home setting.

VCHCP covers pulse oximetry for home use only in the following conditions and after Medical Director Review:

1. When weaning the patient from home oxygen
2. When a change in the patient's physical condition requires an adjustment in the liter flow of their home oxygen needs
3. To determine appropriate home oxygen liter flow for ambulation, exercise, or sleep
4. When used in conjunction with infant home apnea monitoring.

Coverage of home pulse oximetry for indications other than those listed above will be reviewed on a case-by-case basis.

VCHCP does NOT cover the use of home pulse oximetry in the following conditions:

1. asthma management
2. when used alone as a screening/testing technique for suspected obstructive sleep apnea

Pulse oximetry alone is not an efficient method of screening or diagnosing patients with suspected obstructive sleep apnea. The sensitivity and negative predictive value of pulse oximetry is not adequate to rule out obstructive sleep apnea in patients with mild to moderate symptoms. Therefore, a follow up sleep study would be required to confirm or exclude the diagnosis of obstructive sleep apnea, regardless of the results of pulse oximetry screening.

Unless indicated otherwise above, this policy applies unless a specific limitation or exception exists.

ICD-10 Codes:

¹ DME is subject to an annual maximum for some plans.

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This is not a complete list of ICD-10 Codes

E84 Cystic Fibrosis
D75 Erythrocytosis
I20 Angina pectoris
I27.9 Chronic pulmonary heart disease
I27.20-Pulmonary hypertension
I27.81-Cor pulmonale (chronic)
I50 Congestive heart failure
I73.9 Peripheral vascular disease, unspecified
J43 Emphysema
J47 Bronchiectasis
J44 Chronic obstructive pulmonary disease
J84.10 Post inflammatory pulmonary fibrosis
R06.0 Dyspnea and respiratory abnormalities
R09.02 Hypoxemia

CPT Codes:

94760 Noninvasive ear or pulse oximetry for oxygen saturation; single determination
94761 multiple determinations (e.g., during exercise)
94762 by continuous overnight monitoring

A. References

1. AARC Clinical Practice Guideline. Oxygen therapy in the home or extended care facility. *Respir Care*. 1992 Aug;37(8):918-22.
2. National Heart, Lung and Blood Institute/World Health Organization Workshop Report. Global strategy for asthma management and prevention (based on a March 1993 meeting). National Heart, Lung and Blood Institute. Publication Number 95-3659. January 1995.
3. Series F, Marc I, Cormier Y, LaForge J. Utility of nocturnal home oximetry for case finding in patients with suspected sleep apnea hypopnea syndrome. *Ann Int Med* 1993; 119:449-453
4. Farney RJ, Walker LE, Jensen RL, Walker JM. Ear oximetry to detect apnea and differentiate rapid eye movement (REM) and non-REM sleep. Screening for sleep apnea syndrome. *Chest* 1986; 89:533-39
5. ASDA Standards of Practice. Portable recording in the assessment of obstructive sleep apnea. *Sleep* 1994; 17:378-92.
6. AARC Clinical Practice Guideline. Pulse oximetry. *Respir Care* 1991; 36:1406-1409.

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7. *NIH Consensus Statement. Infantile apnea and home monitoring. 1986 Sep 29-Oct 1;6(6):1-10.*

B. History

Reviewers: Richard O. Ashby MD, Thomas Brugman MD, QA Committee
 Reviewed/Revised: Faustine Dela Cruz, RN & Albert Reeves, MD; Date: 11/7/11
 Committee Review: UM on 11/10/11 QAC on 11/22/11
 Reviewed/No Updates: Albert Reeves, MD; Date: 4/17/12
 Committee Reviews: UM on 5/10/12 & QA on 5/22/12
 Reviewed/No Updates: Albert Reeves, MD; Date: 1/28/13
 Committee Review: UM on 2/14/13; QA on 2/26/13
 Reviewed/No Updates: Catherine Sanders, MD
 Committee Review: UM on 2/13/14; QA on 2/25/14
 Reviewed/No Updates: Catherine Sanders, MD
 Committee Review: UM on 02-12-2015 & QA on 02-24-2015
 Reviewed/No Updates: Faustine Dela Cruz, RN & Catherine Sanders, MD
 Committee Review: UM: February 11, 2016; QAC: February 23, 2016
 Reviewed/No Updates: Catherine Sanders, MD & Robert Sterling, MD
 Committee Review: UM: February 9, 2017; QAC: February 28, 2017
 Reviewed/No Updates: Catherine Sanders, MD & Robert Sterling, MD
 Committee Review: UM: February 8, 2018; QAC: February 27, 2018
 Reviewed/No Updates: Catherine Sanders, MD & Robert Sterling, MD
 Committee Review: UM: February 14, 2019; QAC: February 26, 2019
 Reviewed/No Updates: Howard Taekman, MD & Robert Sterling, MD
 Committee Review: UM: February 13, 2020; QAC: February 25, 2020
 Reviewed/No Updates: Howard Taekman, MD & Robert Sterling, MD
 Committee Review: UM: February 11, 2021; QAC: February 23, 2021
 Reviewed/No Updates: Howard Taekman, MD & Robert Sterling, MD
 Committee Review: UM: February 17, 2022; QAC: February 22, 2022
 Reviewed/No Updates: Howard Taekman, MD & Robert Sterling, MD
 Committee Review: UM: February 2, 2023; QAC: February 7, 2023
 Reviewed/No Updates: Howard Taekman, MD & Robert Sterling, MD
 Committee Review: UM: February 8, 2024; QAC: February 27, 2024
 Reviewed/Updated by: Howard Taekman, MD & Robert Sterling, MD
 Committee Review: UM: February 20, 2025; QAC: February 25, 2025

Revision Date	Content Revised (Yes/No)	Contributors	Review/Revision Notes
2/9/17	No	Catherine Sanders, MD; Robert Sterling, MD	Annual Review



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2/8/24, 2/20/25

2/8/18	No	Catherine Sanders, MD; Robert Sterling, MD	Annual Review
2/14/19	No	Catherine Sanders, MD; Robert Sterling, MD	Annual Review
2/13/20	No	Howard Taekman, MD; Robert Sterling, MD	Annual Review
2/11/21	No	Howard Taekman, MD; Robert Sterling, MD	Annual Review
2/17/22	No	Howard Taekman, MD; Robert Sterling, MD	Annual Review
2/2/23	No	Howard Taekman, MD; Robert Sterling, MD	Annual Review
2/8/24	No	Howard Taekman, MD; Robert Sterling, MD	Annual Review
2/20/25	Yes	Howard Taekman, MD; Robert Sterling, MD	Added DME definition, removed background section and updated ICD 9 codes with ICD 10 codes