

October 19, 2023

Testimony of Collin McDonough American Heart Association Support of HB 5167 - Self Measured Blood Pressure Monitoring

Good morning:

Chair Rogers, Vice Chairs Whitsett and Vanderwall, and Members of the Health Policy Committee,

My name is Collin McDonough, and I am the Michigan Government Relations Director for the American Heart Association. The American Heart Association strongly supports extending self-measured blood pressure coverage during postpartum care. To ensure clinical accuracy for the diagnosis and management of patients with hypertension at home, we encourage the committee to consider including the word "validated" before the word device within HB 5167.

Cardiovascular Disease, coronary heart disease, stroke, and heart failure remain leading causes of morbidity and mortality. Research indicates the positive effect of SMBP in improving blood pressure control. In fact, population-based studies have identified a range of risk factors that contribute to incident cardiovascular events, with hypertension as one of the most important. The evidence base for implementing SMBP has proven useful in reducing the risk of death and disability associated with hypertension with the research literature showing that, when combined with additional clinical support, SMBP is effective in reducing hypertension, improving patient knowledge, improving the health system process, and enhancing medication adherence. SMBP has also been associated with patient empowerment, autonomy, self-efficacy, and lifestyle modification.

Nationally, nearly 1 in 2 U.S. adults have hypertension, yet only about 1 in 4 have it under control¹. Too many Michiganders struggle with hypertension—estimated at 36% of the total population. Additionally, those without healthcare coverage have additional burdens that can make management of hypertension even more difficult. This legislation begins to bridge the gap for those who lack healthcare coverage but struggle to control their hypertension, by ensuring coverage of blood pressure monitoring devices.

However, a major gap continues to exist in ensuring the successful delivery of SMBP monitoring. All home-based devices are not validated for clinical accuracy and the validated devices themselves are not always a covered benefit available to those in greatest need. A published final Notice of Benefit and Payment Parameters has identified blood pressure monitors (for hypertension management) as a high value service that insurers "may want to consider offering with lower- or zero-cost sharing." Patients should not be precluded from accessing a validated SMBP device prescribed by their provider due to lack of coverage by their insurance plan, and providers should be appropriately reimbursed for costs

¹ Ritchey MD, Gillespie C, Wozniak G, Shay CM, Thompson-Paul AM, Loustalot F, Hong Y. Potential need for expanded pharmacologic treatment and lifestyle modification services under the 2017 ACC/ AHA Hypertension Guideline. J Clin Hypertens (Greenwich). 2018 Oct;20(10):1377–91

² Centers for Medicare and Medicaid Services. Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2021. Final Rule. May 14, 2020. https://www.govinfo.gov/content/pkg/FR-2020-05-14/pdf/2020-10045.pdf

associated with training patients on SMBP, transmission of BP data, interpretation of BP readings, and reporting.

Currently, Michigan residents are only getting part of the picture, and we need to make sure they have the support they need to control their blood pressure. The American Heart Association urges a favorable vote on HB 5167.

¹ Fuster V, Frazer J, Snair M, Vedanthan R, Dzau V; Committee on Global Health and the Future of the United States: A Report of the National Academies of Sciences, Engineering and Medicine. The future role of the United States in global health: emphasis on cardiovascular disease. J Am Coll Cardiol. 2017;70:3140–3156. doi: 10.1016/j.jacc.2017.11.009

[&]quot;Lawes CM, Vander Hoorn S, Rodgers A; International Society of Hyper-tension. Global burden of blood-pressure-related disease, 2001. Lancet.2008;371:1513–1518. doi: 10.1016/S0140-6736(08)60655-8

^{III} Poulter NR, Prabhakaran D, Caulfield M. Hypertension. Lancet.2015;386:801–812. doi:10.1016/S0140-6736(14)61468-9

^{iv} Fletcher BR, Hinton L, Hartmann-Boyce J, Roberts NW, Bobrovitz N, McManus RJ. Self-monitoring blood pressure in hypertension, patient and provider perspectives: a systematic review and thematic synthesis. Patient Educ Couns. 2016;99(2):210–219.

^v Stergiou GS, Bliziotis IA. Home blood pressure monitoring in the diagnosis and treatment of hypertension: a systematic review. Am J Hypertens. 2010;24(2):123–134.

vi Uhlig K, Patel K, Ip S, Kitsios GD, Balk EM. Self-measured blood pressure monitoring in the management of hypertension: a systematic review and meta-analysis. Ann Intern Med. 2013;159(3):185–194.