



MPC Home Management of Preeclampsia

Policy Number: PA 28
Last Review Date: 2/12/2026
Effective Date: 09/01/2023

PA 28 – Home Management of Preeclampsia

Maryland Care, Inc., dba Maryland Physicians Care (MPC) considers **Home Management for Preeclampsia** medically necessary if **ALL** the following are met:

1. The member is enrolled with MPC on the date the service will be rendered.
2. The member consents to Home Management services and has the capability to utilize the monitoring tools provided.
3. The member is currently 20 weeks gestation or greater.
4. The member has documentation of at least **ONE** of the following:
 - Documentation of Blood Pressure 140 mm Hg or higher systolic or 90 mm Hg or higher diastolic on two occasions at least 6 hours apart **OR** Proteinuria (0.3g or greater on 24-hour urine collection or 1+ or greater on urine dipstick) with previously normal blood pressure.
 - Documentation of Preeclampsia in prior pregnancy
 - Prior Diagnosis of Hypertension
 - Current pregnancy is a Multifetal Gestation
 - Documentation of pre-existing Chronic Kidney Disease
 - Documentation of a pre-existing Autoimmune Disease
 - Diabetes Type 1 or 2 prior to pregnancy
 - Member is 35 y/o or older
 - Member is of African American descent
 - Family History of Preeclampsia (Mother or Sister)
 - BMI \geq 30 prior to pregnancy
5. The member has documentation of:
 - 2 BP measurements taken 4 or more hours apart reading at least 140 mm Hg systolic or 90 mm Hg diastolic.

OR

 - Proteinuria with a protein-to-creatinine ratio of at least 0.3mg per dL **OR** 2+ protein on a urine dipstick test.
6. Request does **NOT** exceed 30 units per month antepartum **and/or** 14 units for 2 weeks postpartum. Any request exceeding 2 weeks of visits post-partum requires Medical Director Review.



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Limitations

Home Management for Preeclampsia is not covered for the following:

- Member is not currently pregnant or within 2 weeks post-partum
- Request exceeds 30 units/mo antepartum
- Request exceeds 2 total weeks post-partum

Background

One of the most common complications of pregnancy and the third cause of maternal death is preeclampsia. Thus, this group of mothers should be supported, trained, and receive efficient health care services. Home Management is one strategy to improve/prevent complications of Pregnancy where preeclampsia is present.

Codes

Code	Description
S9211	Home management of gestational hypertension, includes administrative services, professional pharmacy services, care coordination and all necessary supplies and equipment (drugs and nursing visits coded separately); per diem
S9212	Home management of postpartum hypertension, includes administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem (do not use this code with any home infusion per diem code)
S9213	Home management of preeclampsia, includes administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing services coded separately); per diem (do not use this code with any home infusion per diem code)



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References

1. (2016, July 27). Current best practice in the management of hypertensive disorders in pregnancy. National Library of Medicine. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4968992/>
2. (2024, March) Hypertensive Disorders of Pregnancy. American Academy of Family Physicians. <https://www.aafp.org/pubs/afp/issues/2024/0300/hypertensive-disorders-of-pregnancy.html#afp20240300p251-c1>
3. (n.d.). Hypertension and Preeclampsia in Pregnancy. ACOG- The American College of Obstetricians and Gynecologist. <https://www.acog.org/topics/hypertension-and-preeclampsia-in-pregnancy>
4. (n.d.) Preeclampsia: an update- National Library of Medicine. <https://pubmed.ncbi.nlm.nih.gov/25622379/>
5. (2018, May) Optimizing Postpartum Care. The American College of Obstetricians and Gynecologists. <https://www.qualityhealth.org/bree/wp-content/uploads/sites/8/2019/05/ACOG-optimizing-postpartum-care-2016.pdf>

Revision Log

Effective Date	09/01/2023
Reviewed and Revised: Gestational age requirement added as additional criteria point.	10/25/2023
Annual Review	02/08/2024
Reviewed and revised: Added 1 st bullet under criteria #4 with the required blood pressure and proteinuria results.	February 2025
Reviewed and revised: added Codes and updated references	February 2026