

Remote Monitoring

What is Remote Patient Monitoring?

Remote Physiologic Monitoring (RPM), sometimes called Remote Patient Monitoring, describes non-face-to-face monitoring and analysis of physiologic factors used to understand a patient's health status. RPM involves the collection and analysis of patient physiologic data that are used to develop and manage a treatment plan related to chronic or acute conditions.

What is Remote Therapeutic Monitoring (RTM)?

Remote Therapeutic Monitoring (RTM) describes the use of medical devices to monitor a patient's health or response to treatment using non-physiological data. If data collected from a device cannot be billed under RPM, it likely can be billed under RTM.

What is Continuous Monitoring?

Continuous monitoring describes the collection and tracking of patient vitals including heart rate, respiratory rate, and movement in real time.

What are common use cases for RPM?

RPM services are used to monitor acute and chronic conditions including high blood pressure, diabetes, weight loss or gain, heart conditions, sleep apnea, and asthma. Common RPM devices include blood pressure monitors, blood glucose monitors, pulse oximeters, and weight scales.

What are common use cases for RTM?

RTM services are used to monitor non-physiological, therapeutic data from patients. For instance, RTM can be used to monitor medication adherence, response to therapy, musculoskeletal activity, and pain levels.





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What are common billing codes associated with RPM?

The following CPT codes are associated with RPM services:

- 99453 Time spent on initial set-up and patient education on use of equipment.
- 99454 Monthly remote monitoring of the patient. This includes the supply and use of the medical device to collect and transmit health data from the patient. It can only be billed once every 30 days
- 99457 Initial treatment and management of the patient. This code is used to bill for time spent by a physician or provider treating the patient's condition. It covers the first 20 minutes of care management or consultation within a 30-day period.
- 99458 Additional treatment and management of the patient. This code covers
 reimbursement for each additional 20 minutes of care management or consultation services
 within a 30-day period.

What are common billing codes associated with RTM?

The CPT codes for RTM services effectively mirror those for RPM services. The following CPT codes are associated with RTM services:

- 98975 Time spent on initial set-up and patient education on use of the device.
- 98976 The supply of a remote device to monitor the respiratory system, including scheduled recordings or programmed alerts. It can only be billed once every 30 days.
- 98977 The supply of a remote device to monitor the musculoskeletal system, including scheduled recordings or programmed alerts. It can only be billed once every 30 days.
- 98980 Initial treatment and management of the patient. This code is used to bill for clinical time that a physician or provider spends with the patient to monitor or manage their condition. It covers the first 20 minutes of a consultation within one calendar month.
- 98981 Additional clinical time between a physician or provider and the patient dedicated to treatment and management. 98981 covers each additional 20 minutes spent in consultation with the patient within one calendar month.

What are common billing codes associated with continuous monitoring?

There are not yet any CPT codes associated with continuous monitoring services.



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What are some common challenges or barriers to billing for RPM services?

In order to bill for monthly RPM services (CPT code 99454), data must be collected and transmitted from the patient for a minimum of 16 days within a 30-day period. If data is not consistently collected or transmitted, it can be difficult for providers to meet the 16 days required for them to bill for the services. Additionally, RPM services can only be billed by one practitioner per 30-day period and cannot be reported for a patient more than once during that period (even when multiple medical devices are provided to a patient).

• Exception: During the ongoing public health emergency, if a patient is suspected or diagnosed with COVID-19, data can be collected over as few as two days.

CPT codes **99457** and **99458** can only be billed if clinical staff members, physicians, or other qualified providers spend at least 20 minutes interpreting a patient's physiologic data and using that data to manage or adjust the patient's care plan.

RPM and RTM services are reimbursable for physical health conditions, but not yet for mental health conditions.

What are some common challenges or barriers to billing for RPM services?

Existing Systems and Interoperability: Electronic Health Record (EHR) systems are designed to support traditional episodic care, so offices can face challenges in setting up and tracking RPM data from patients. Also, health care systems and providers use all sorts of different technologies and networks, so sharing data or referring patients to other providers can pose challenges in the coordination of care.

Patient Adherence and Engagement: Depending on the device and the patient, it can be difficult to ensure that patients are regularly collecting enough quality data to effectively manage their condition. During the initial visit, it is important to educate the patient on how and when to use their device. Regular communication and alerts can help with patient adherence.

Data Security: As RPM, RTM, and continuous monitoring services become more common, it is critical that patient data be transmitted securely and kept confidential from unauthorized users.