



Remote Patient Monitoring

Kelli Magnarelli, RN,BSN

Director, Care Delivery Transformation

April 26, 2021

Introduction to Remote Patient Monitoring

- In 2018, CMS initiated reimbursement for remote patient monitoring (RPM)
- Since then, CMS drastically changed the RPM billing system
 - 3 new CPT codes were introduced to streamline reporting, documentation requirements, and increased reimbursement
- Majority of providers will benefit from using the new billing codes
- Since CMS started reimbursement for RPM, other payers began reimbursement with different requirements than CMS
- RPM and Telehealth have seen substantial growth in a short period of time as a result of COVID-19

Remote Patient Monitoring: What You Need To Know

January 2021:

- CMS announced it would conduct a series of audits on Medicare part B telehealth services in two phases – RPM is part of the 2nd phase
- Most RPM compliance problems stem from misunderstanding requirements or partnering with a vendor that cuts corners
- If an organization has an established RPM program or is considering one, it is important to be aware of possible audits to ensure organizations make the right decision for their program

Four Areas of Focus for RPM Compliance

#1 – RPM Coding and Billing Rules

- Big problems arise from coding errors – results in denials
- Frequent coding errors turn up the heat on providers
 - Two classifications of improper coding:
 - **Upcoding** - reporting a higher level of service or procedure
 - **Downcoding** - occurs when a provider fails to provide relevant documentation

Serious compliance risk that leads to audits, reimbursement take backs, and possible charges of abusive/fraudulent billing

#2 – RPM Rules about the Number of Days and Data Transmission

- Concerns the amount of time, specifically the days services are rendered
- Requires the use of a medical device that digitally collects and transmits 16 or more days of data every 30 days
 - Related to CPT codes 99453 and 99454
- Significant confusion arose from a temporary waiver permitting providers to deliver and bill RPM services to patients with suspected or confirmed cases of COVID-19

#3 – Text Messaging as a Form of RPM Interactive Communication

- Confusion surrounded what qualifies as interactive communication
- Texting is used by many RPM and CCM platforms as a form of communication
 - If a program is using texting as a method for delivering billable interactive communication, it is non-compliant with CMS guidelines, thus raises red flags
- CPT 99457 and CPT 99458 define interactive conversation that occurs in real time and includes two-way interactions that can be enhanced with video

Final 2021 CMS rule no longer permits texting as a form of communication.

#4 – Multiple Practitioner Delivery of RPM Services

- CMS clarifies only a single practitioner can bill for CPT codes 99453 and 99454
- If multiple providers bill, claims are likely to be denied
- Repeated billing attempts raise a red flag with subsequent audit
- A 2020 rule inferred multiple providers could provide RPM as long as they used separate devices (i.e. cardiology BP readings)

RPM Code Management Overview

- **CPT Code 99453**

Remote monitoring of physiologic parameter(s) (e.g. weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment (avg. pay rate: ~\$21)

- **CPT Code 99454**

Remote monitoring of physiologic parameter(s) (e.g. weight, blood pressure, pulse oximetry, respiratory flow rate), initial; device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days (avg. pay rate: ~\$64)

- **CPT Code 99457**

Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; initial 20 minutes (avg. pay rate: ~\$55)

- **CPT Code 99458**

Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; additional 20 minutes (avg. pay rate: ~\$44)

RPM Billing in Action



To achieve success and maintain compliance...

- Physician practices should partner with a provider who uses an RPM platform that includes compliance as a core component of its functionality
- They should have a comprehensive understanding of all CMS rules concerning RPM and ensure they are built into their platform
- When rules are changed, platforms should be updated to reflect those changes when taken into effect
- The adoption of RPM holds great promise for lowering hospital admission rates and improving outcomes for patients with chronic conditions