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Richelle Marting is an attorney, registered health information administrator, and certified coder who focuses on healthcare coding, billing, and reimbursement issues. She has practical, in-the-trenches experience with coding and billing issues. She has served as an outpatient multi-specialty surgery coder, hospital-based outpatient coder and a compliance coordinator for a large multi-specialty medical group. As an attorney she advises clients proactively on complex reimbursement questions and has guided multiple clients through extensive Medicare and OIG audits and investigations.
Overview

• Evolution of Remote Physiologic Monitoring Coverage
• Remote Therapeutic Monitoring
The collection of physiologic data (for example, ECG, blood pressure, glucose monitoring) digitally stored and/or transmitted by the patient to the provider

- Not Medicare telehealth services
- These fall under a broader category of emerging remote, non-telehealth services
- No originating site restriction
- No A/V equipment
- Considered an E/M service; impacts who can bill
Remote Physiologic Monitoring (RPM)

- Classified as a care management service
  - General supervision
- CPT 99091 Collection and interpretation of **physiologic data** (eg, ECG, blood pressure, glucose monitoring) digitally stored and/or transmitted by the patient and/or caregiver to the **physician or other qualified health care professional**, qualified by education, training, **licensure/regulation** (when applicable) requiring a **minimum of 30 minutes** of time, each **30 days**
- Patient consent is required
- Physician or QHP must have face-to-face visit with patient in the previous year
- Advance consent required
- Cost sharing applies
- Face-to-face initiating visit
- **No clinical staff time, no payment for the equipment**
- **No order, no particular type of device**
Remote Physiologic Monitoring (RPM)

- CPT 93227 External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; review and interpretation by a physician or other qualified health care professional

- CPT 93272 External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; review and interpretation by a physician or other qualified health care professional

- CPT 95250 Ambulatory continuous glucose monitoring of interstitial tissue fluid via a subcutaneous sensor for a minimum of 72 hours; physician or other qualified health care professional (office) provided equipment, sensor placement, hook-up, calibration of monitor, patient training, removal of sensor, and printout of recording
Remote Physiologic Monitoring (RPM)

- **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

- **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

- **99457** Remote physiologic monitoring treatment management services, 20 minutes or more of clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month
<table>
<thead>
<tr>
<th>Requirement</th>
<th>99091</th>
<th>99457</th>
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<tbody>
<tr>
<td>Requires the use of a medical device as defined by the FDA</td>
<td></td>
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<tr>
<td>Requires order from a physician or other QHP</td>
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<tr>
<td>Consent</td>
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<td>Face to face exam</td>
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<td>?</td>
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<tr>
<td>Reporting period</td>
<td>30 days</td>
<td>Calendar month (16 days)</td>
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<td>Provider time</td>
<td>30 minutes</td>
<td>20 minutes</td>
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<tr>
<td>Eligible providers’ time</td>
<td>Physician or QHP</td>
<td>Physician, QHP, clinical staff</td>
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<tr>
<td>Requirement</td>
<td>99453</td>
<td>99454</td>
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<tr>
<td>Services Captured</td>
<td>Technical Component</td>
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<td>When</td>
<td>Once</td>
<td>30 days</td>
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<tr>
<td>Time Requirement</td>
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<tr>
<td>Interaction with Patient Required?</td>
<td>Yes</td>
<td>No</td>
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</tbody>
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Remote Physiologic Monitoring (RPM)

- 2019 Physician Fee Schedule Final Rule: Could not provide “incident-to”
- 2019 Technical Correction: “incident-to” allowed, but silent on supervision
- 2020 Physician Fee Schedule Final Rule: General supervision
- PHE: New or established patients; after PHE established only
- PHE: acute or chronic conditions
- 99453, 99454: may collect data < 16 days
- No separate payment in FQHCs, RHCs
Remote Therapeutic Monitoring (RTM)

AMA CPT Description Effective January 1, 2022

Remote therapeutic monitoring services (eg, musculoskeletal system status, respiratory system status, therapy adherence, therapy response) represent the review and monitoring of data related to signs, symptoms, and functions of a therapeutic response. These data may represent objective device-generated integrated data or subjective inputs reported by a patient. These data are reflective of therapeutic responses that provide a functionally integrative representation of patient status.
AMA CPT Description Effective January 1, 2022

Remote therapeutic monitoring treatment management services are provided when a physician/other qualified health care professional uses the results of remote therapeutic monitoring to manage a patient under a specific treatment plan. To report remote therapeutic monitoring, the service must be ordered by a physician or other qualified health care professional.
Remote Therapeutic Monitoring (RTM)

- Created by CPT October 2020, valued January 2021, planned for CPT 2022
- Services and structure resemble RPM
- Considered medicine codes
- Monitor health conditions
- Musculoskeletal system status, respiratory status, therapy adherence, medication response
- May be self-reported or digitally uploaded
Remote Therapeutic Monitoring (RTM)

- Primary billers are nurses and PTs per AMA RUC valuation
- Issue: as constructed, the concept of incident-to billing applies
  - PTs not allowed to bill for a service provided as incident-to
- Issue: as medicine codes, cannot fall under care management category where general supervision applies
- Seeking comment on how to remedy
Remote Therapeutic Monitoring (RTM)

989X4 Remote therapeutic monitoring treatment management services, physician/other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient/caregiver during the calendar month; first **20 minutes** (RUC recommends 0.62 wRVU)

989X5 Remote therapeutic monitoring treatment management services, physician/other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient/caregiver during the calendar month; each additional 20 minutes (List separately in addition to code for primary procedure) (RUC recommends 0.61 wRVU)

989X1 (Remote therapeutic monitoring (e.g., respiratory system status, musculoskeletal system status, therapy adherence, therapy response); initial set-up and patient education on use of equipment),

989X2 (Remote therapeutic monitoring (e.g., respiratory system status, musculoskeletal system status, therapy adherence, therapy response); device(s) supply with scheduled (e.g., daily) recording(s) and/or programmed alert(s) transmission to monitor respiratory system, each 30 days)

989X3 (Remote therapeutic monitoring (e.g., respiratory system status, musculoskeletal system status, therapy adherence, therapy response); device(s) supply with scheduled (e.g., daily) recording(s) and/or programmed alert(s) transmission to monitor musculoskeletal system, each 30 days)
**Other Monitoring Services**

### 94774
Pediatric home apnea monitoring event recording including respiratory rate, pattern and heart rate per 30-day period of time; includes monitor attachment, download of data, review, interpretation, and preparation of a report by a physician or other qualified health care professional

(Do not report 94774 in conjunction with 94775-94777 during the same reporting period)

### 94775
Monitor attachment only (includes hook-up, initiation of recording and disconnection)

### 94776
Monitoring, download of information, receipt of transmission(s) and analyses by computer only

### 94777
Review, interpretation and preparation of report only by a physician or other qualified health care professional
Remote monitoring of a wireless pulmonary artery pressure sensor for up to 30 days, including at least weekly downloads of pulmonary artery pressure recordings, interpretation(s), trend analysis, and report(s) by a physician or other qualified health care professional.

(Report 93264 only once per 30 days)

(Do not report 93264 if download[s], Interpretation[s], trend analysis, and report[s] do not occur at least weekly during the 30-day time period)

(Do not report 93264 if review does not occur at least weekly during the 30-day time period)

(Do not report 93264 if monitoring period is less than 30 days)
Other Monitoring Services

95250
Ambulatory continuous glucose monitoring of interstitial tissue fluid via a subcutaneous sensor for a minimum of 72 hours; physician or other qualified health care professional (office) provided equipment, sensor placement, hook-up, calibration of monitor, patient training, removal of sensor, and printout of recording

(Do not report 95250 more than once per month)

(Do not report 95250 in conjunction with 99091, 0446T)

95249
Patient-provided equipment, sensor placement, hook-up, calibration of monitor, patient training, and printout of recording

(Do not report 95249 more than once for the duration that the patient owns the data receiver)

(Do not report 95249 in conjunction with 99091, 0446T)

95251
Analysis, interpretation and report

(Do not report 95251 more than once per month)

(Do not report 95251 in conjunction with 99091)
Questions?

Available Through Heartland Telehealth Resource Center for Technical Assistance
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