GET STARTED TODAY

Remote Patient Monitoring (RPM)

MDLand
The Future of Digital Health

Patient Engagement	Improve Quality of Patient Care	Proactive Care Plan Management	Coordination of Care

Remote Patient Monitoring

Remote Patient Monitoring (RPM) is a method of healthcare delivery that uses the latest advances in information technology to gather patient data outside of traditional healthcare settings, involving the interpretation of medical information without a direct interaction between the practitioner and beneficiary.

RPM Service is a Medicare program.

As a Medicare beneficiary with two or more chronic conditions, you are eligible to receive additional support from our healthcare team.

Enhanced Quality of Live

Reduced hospital readmission and lengths of stay, fewer emergency room visits and lower costs of chronic disease care as you receive timely and convenient access to care wherever and whenever it's needed.

One in five Medicare patients returns to the hospital within 30 days of discharge.

More than **7 million patients** now benefit from remote patient monitoring.

How it Works:

01 For Medicare Patients

02 Sign a Consent Form

Sign a consent form from your provider to enroll in RPM

03 Receive the Benefits

Upon enrolling, your provider is able to:

- **P**rovide education, support and feedback
- **E**arly detection for improved outcomes
- **R**eceive care from the comfort of your own home, reducing costs and other logistical limitations
- **P**roactive intervention
- **Co**ntinuous real time data enables and facilitates continuity of care
- **G**reater access to practitioners through digital connection
- **H**elp you with medication management and adherence

Remote Patient Monitoring (RPM)

Core Requirements:

1 Patients must be diagnosed with two or more chronic conditions

2 Document Patient Consent

3 Perform at least one patient visit within a year. For new patients or patients who have not seen the billing Practitioner within one year, RPM services must be initiated during an initial face-to-face visit wiih the billing practitioner.

4 Document at least 30 minutes of non-face-to-face Physician, or other Qualified Health Professionals' time: Ex.

- Time involved with data accession
- Time spent on review and interpretation of patient medical information
- Time spent on modification of care plan as necessary

Billing Codes:

- **CPT code 99091** – Remote patient monitoring, 30 minutes of time spent based on a 30 day period limited to Physicians and other Qualified Health Care Professionals. The 2018 average reimbursement is $58.38.

- **CPT code 99453** – Remote monitoring of physiologic parameter(s), pays for the initial set up and education on the use of the equipment. Estimated average reimbursement is $19.46.

- **CPT code 99454** –Remote monitoring of physiologic parameter(s), pays for monitoring the daily recording(s) or programmed alert(s) transmission, each 30 days. Estimated average reimbursement is $64.15.

- **CPT code 99457** –Remote physiologic monitoring treatment management services, 20 minutes (or more) of clinical staff time, requiring interactive communication with the patient/caregiver during the month. Estimated average reimbursement is $51.54.

- **CPT code 99458 (2020 New)**–Each additional 20 minutes of monitoring and treatment management that includes interactive communication with the patient or caregiver during the calendar month. Estimated average reimbursement is $42.22 .

Helps you improve and Achieve a Better MIPS Score and Higher Bonus Payments.

Improvement Activities:
IA_BE_14: Engage Patients and Families to Guide Improvement in the System of Care
IA_BE_1: Use of CEHRT to Capture Patient Reported Outcomes
IA_CC_10: Care transition documentation practice improvements
IA_EPA_2: Use of telehealth services that expand practice access

Promoting Interoperability:
PI_PEA_1: Provide Patients Electronic Access to Their Health Information

MDLand
The Future of Digital Health

Contact: (212) 363 8000 | sales@mdland.com