



DIFFERENCE IN INTERPRETATION AND MANAGEMENT OF REMOTE MONITORING CODES

Remote Patient Monitoring—also referred to as RPM—was initiated by Medicare in January 2018 with the unbundling of CPT 99091 from the Chronic Care Management (CCM) program. Effective from January 1, 2019, three new Remote Physiologic Monitoring codes became available (99453, 99454, 99457), and in January

2020 the new add on code 99458. These codes better describe the role of remote patient monitoring in contemporary practice and major difference is that the new codes do not require a physician to monitor data, instead requires an FDA cleared medical device and clinical staff to monitor data.

CPT® Code 99457 / 99458

Remote physiologic monitoring treatment management services, 20 minutes or more of clinical staff/physician/other qualified healthcare professional (QHCP) time in a calendar month requiring interactive communication (phone, text and email) with the patient/caregiver during the month.

- Requires 20 minutes time spent per month
- Based on calendar month
- Reimburses for time spent by physicians, QHCPs or clinical staff
- Requires an interactive communication between provider and patient or caregiver
- Requires FDA cleared medical device

CPT® Code 99091

Collection and interpretation of physiologic data (e.g., ECG, blood glucose monitoring) digitally stored and/or transmitted by the patient to and/or caregiver to the physician or other qualified health care professional, qualified by education, training, physician licensure/regulation (when applicable) requiring a minimum of 30 minutes of time.

- Requires 30 minutes time spent per month
- Based on a 30-day period
- Reimburses only for physician or QHCPs
- No communication required
- Does not require FDA cleared medical device

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99547/99458 and 99091 codes cannot be billed concurrently.

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