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CMS Finalizes Remote Patient Monitoring Regulations in Final Rule: 7 Takeaways

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CMS [released](#) the 2021 physician fee [schedule](#) Dec. 1 with expanded [telehealth](#) services, remote physiologic monitoring updates and an extension for telecommunications tech supervision.

Seven takeaways:

1. CMS clarified its payment policies related to the remote physiologic monitoring services for CPT codes 99453, 99454, 99091, 99457 and 99458, which were finalized in recent years. These services include remote monitoring of weight, blood pressure, pulse oximetry and respiratory flow rate.
2. Once the COVID-19 public health emergency ends, there must be an established patient-physician relationship for remote physiologic monitoring services to be furnished.
3. Auxiliary personnel, such as contracted employees, may provide services under CPT codes 99453 and 99454 incident to the physician's billing services while under their supervision. These services include setting the patient up and teaching them how to use the equipment.
4. Medical devices supplied to patients as part of RPM services must fall under Section 201 of the Federal Food, Drug and Cosmetic Act, which requires the device to be valid, reliable and transmit data electronically and automatically, rather than the patient having to self-report.
5. After the public health emergency ends, 16 days of data each 30 days of remote monitoring must be collected and transmitted to meet the requirements to bill CPT codes 99453 and 99454.
6. CMS clarified that for CPT codes 99457 and 99458, which include one-on-one remote monitoring management services with the clinician, interactive communication is defined as a conversation occurring in real-time via synchronous, two-way interactions using video and/or audio.
7. During the public health emergency, CMS adopted a revised definition of direct supervision to include the virtual presence of the supervising physician or practitioner using audio and video communications technology. Under the final rule, direct supervision can continue being provided virtually through the end of the emergency or Dec. 31, 2021.