



# Remote **Therapeutic** Monitoring





# Learning Objectives

- The benefits and value of RTM for your patients
- The revenue impact opportunity of RTM for your practice
- How to appropriately document and bill each RTM code
- Strategies to implement technology and clinical workflows to support RTM in daily practice

# What Is RTM?

**Remote Therapeutic Monitoring (RTM)** services monitor health conditions, including musculoskeletal system status, respiratory system status, therapy (medication) adherence, and therapy (medication) response.

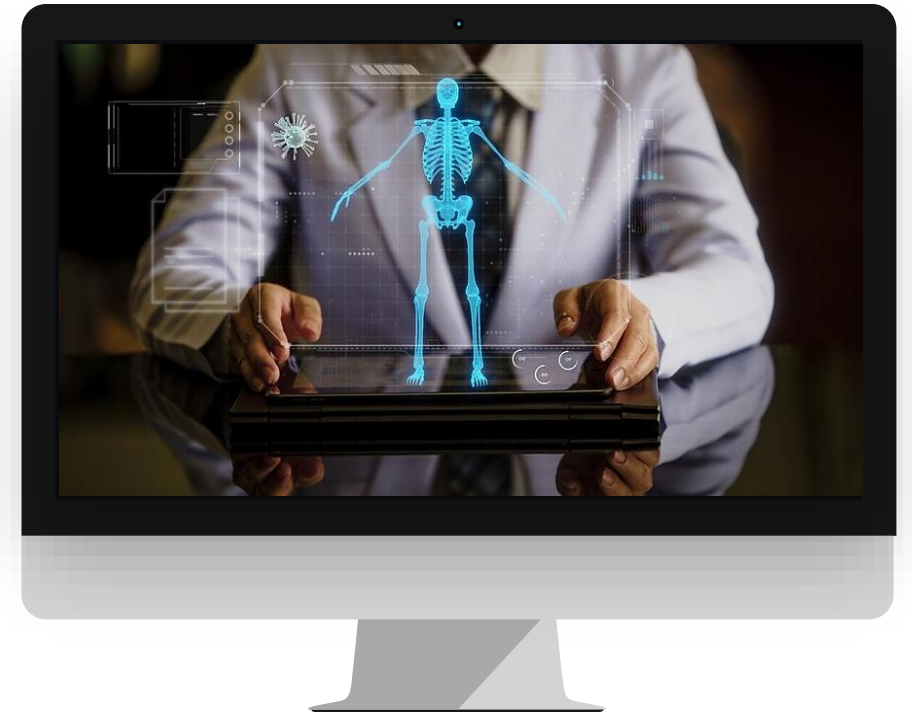
- In November 2022 the American Medical Association (AMA) created 5 CPT codes for RTM services: 98975, 98976, 98977, 98980, and 98981.

## Eligibility:

To be eligible to be reported under CPT codes 98975, 98976, or 98977, the service must be ordered by a physician or other qualified healthcare professional, such as a physical therapist, and the data collected must relate to signs, symptoms, and functions of a therapeutic response.

## Data Requirements:

Data that represents objective device generated integrated data or subjective inputs reported by a patient is allowed. Data may be driven by devices and/or Software. Patients may self-report, manually enter, and digitally upload RTM data (APTA).



# Five Codes

Must be conducted on a medical device as defined by the FDA

## RTM Services

- **CPT code 98975:** Remote therapeutic monitoring, initial set-up, and patient education on the use of equipment for monitoring respiratory system status, musculoskeletal system status, therapy adherence, and therapy response.
- **CPT code 98976:** Remote therapeutic monitoring for monitoring respiratory system status, musculoskeletal system status, therapy adherence, and therapy response. This includes supplying device(s) with scheduled recordings and/or programmed alerts transmission to monitor the respiratory system, with services provided every 30 days.
- **CPT code 98977:** Remote therapeutic monitoring for monitoring respiratory system status, musculoskeletal system status, therapy adherence, and therapy response. This includes supplying device(s) with scheduled recordings and/or programmed alert transmission to monitor the musculoskeletal system, with services provided every 30 days.

## RTM Services

- **CPT code 98980:** 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
- **CPT code 98981:** 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)



# RTM: Who Can Perform and Bill?



## Physician:

Physical therapists, physiatrists,  
Chiropractors, Orthopedic surgeons  
Sports medicine physicians, Primary care  
physicians, Cardiologists, and  
Endocrinologists.



## Qualified Health Care Practitioners (QHCP)

An individual who is qualified by education,  
training, licensure/regulation (when applicable),  
and facility privileging (when applicable) who  
performs a professional service within his/her  
scope of practice and independently reports that  
professional service [PT(a), OT(a), ST, etc.]



**RTM: Who Can Perform and Bill?**

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

## Interpretation

- **Guard Rails:** For RTM, an episode of care begins when remote monitoring of a specific condition or treatment goal is initiated and ends when the targeted data is collected and/or treatment goals are met.
  - Report this code only once per episode of care and only if monitoring occurs over a period of at least 16 days
- **When to Use:** Use to report the initial time spent setting up and teaching the patient/caregiver how to use the device
- **What to Use:** Ensure that any monitoring devices or systems comply with the U.S. Food and Drug Administration's (FDA) regulatory standards. Always verify the FDA approval status of the device with the manufacturer before use. You can activate additional features in the ExerciseNow software to utilize it for Remote Therapeutic Monitoring (RTM) purposes.
- **Documentation:** Document the type of device being used, the specific education and training provided to the patient and/or caregiver, and any device setup required

# 98976

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

## Interpretation

- **When to Use:** Report this code only when monitoring extends at least 16 days within a calendar month.
- **Documentation:** Document the name and description of the device provided for the respiratory system monitoring.



# 98977

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

## Interpretation

- **When to Use:** Report this code only when monitoring extends at least 16 days within a calendar month.
- **Documentation:** Document the name and description of the device provided for monitoring the musculoskeletal system.

# 98980: Treatment

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

## Interpretation

- **Guard Rails:** Count cumulative time spent in data review and patient/caregiver interaction in a calendar month (not every 30 days). Report the base and add-on codes together on the claim, based on total time, at the end of each calendar month. The base code (98980) may only be reported once per calendar month. Do not report 98980 unless a full 20 minutes of monitoring has occurred.
- **When to Use:** Use to report the first 20-minute increment of time spent reviewing and integrating the data collected during remote monitoring to inform treatment goals; monitor the patient's progress and adherence to the treatment plan; and provide clinical feedback to the patient/caregiver.
- **Documentation:** Document the data gathered from the device, the date and time of the patient and/or caregiver interaction, and any decisions made that impact the treatment and plan of care as a result of the monitoring.

# 98981: Treatment

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)

## Interpretation

- **Guard Rails:** Use to report each subsequent 20-minute increment of time spent reviewing and integrating the data collected during remote monitoring to inform treatment goals; monitor the patient's progress and adherence to the treatment plan; and provide clinical feedback to the patient/caregiver.
- **When to Use:** Do not report 98981 unless a full additional 20 minutes of monitoring has occurred. 98980 must be billed if 98981 is being billed.
- **Documentation:** Document the data gathered from the device, the date and time of the patient and/or caregiver interaction, and any decisions made that impact the treatment and plan of care as a result of the monitoring.

# Payment Modifiers for Assistants



The two device codes, 98976 and 98977, are not subject to the payment adjustment that applies to services provided by physical therapist assistants.



However, code 98975, representing initial set-up and patient education services, is subject to the adjustment.



# What Does RTM Look Like in Practice?



# How RTM Works



**98975:** Setup, education, and minimum 16 days of access

**Potential Revenue: \$19.58**

**98977:** Minimum 16 days of activity over 30 days

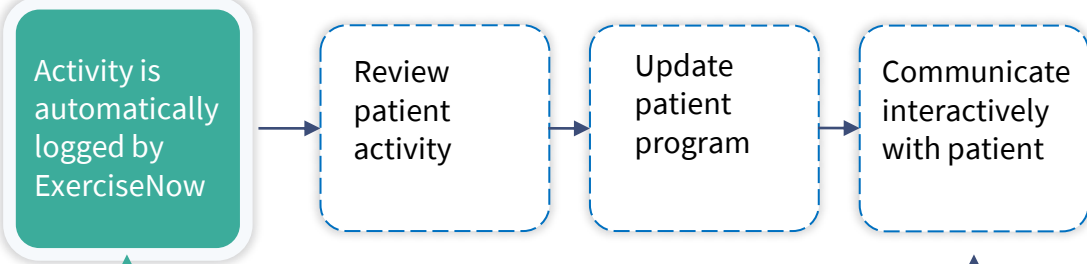
**Potential Revenue: \$19.58**

**98980/81:** 20 minutes of monitoring and one interactive communication per calendar month

**Potential Revenue: \$49.66 (plus \$39.90 for 98981)**

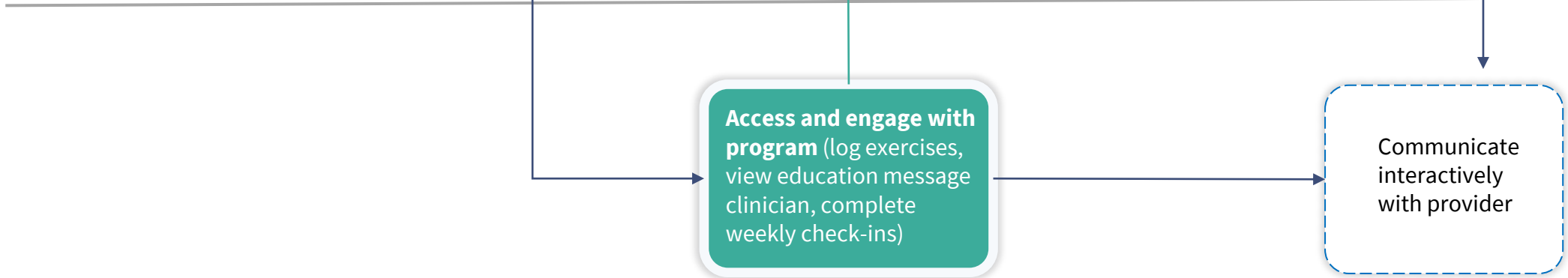
**Provider Workflow**

**Patient Workflow**



**Access and engage with program** (log exercises, view education message clinician, complete weekly check-ins)

Communicate interactively with provider





# RTM ROI and Calculations

# RTM: How Will This Impact Productivity?

## FAQ: What Effect Will RTM Have on My Team?

### ● RTM Per-Provider Productivity Equation:

$(\# \text{ Evals/Mo/Provider}) * (\text{Included Payer Mix}) * (\text{Retention Rate}) * (\text{___ mins})$

- **Example:** A provider is performing 46 evaluations per month. 40% of those evaluations include patients with Traditional Medicare. 85% of patients are retained for the first month. The provider spends an average of 20 minutes per patient per month monitoring and communicating data for RTM.

- $(46) * (0.4) * (0.85) * (20 \text{ mins}) = 214 \text{ mins/mo}$
- $214 \text{ mins/mo} = <1 \text{ hr/week}$
- Revenue Potential/Mo for that level of commitment: Est. \$2,591.00/mo



# RTM: What is the ROI For My Company

## ● Organizational SOM ROI Calculation for RTM

- $(\# \text{ Annualized Evals}) * (\text{MC Payer Mix}) * (\text{Customer Retention Rate}) * (\text{Avg. Revenue}) = \text{ROI Revenue}$
- **Example:** An organization with 25 provider is performing an average of 13,750 evals per year. 40% of those evaluations include patients with Traditional Medicare. 85% of patients are retained for the first month. An average patient episode for patients included in RTM includes CPT codes: 98975 x 1, 98980 x 1, 98977 x 1 98981 x 1.

## ● Example: Sample Rehab w/ 20 PTs.

- $(13,750 \text{ evals}) * (0.4 \text{ MC Payer Mix}) * (0.85 \text{ Retention}) * (\$166.25) = \$777,218.75 \text{ net new revenue}$

## ● ROI Yield = Net New Revenue/Cost

**Ex. ROI Yield:**  $\$777,218.75 / 55,500 * 100\% = \text{Yield of } \mathbf{1,400.00\%}$

**ROI**



# References

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