

# Telehealth & RPM Billing Guidelines

In recent years, the Centers for Medicare & Medicaid Services (CMS) have released the physician fee schedule with expanded reimbursement for remote patient monitoring (RPM). The guidelines notably increase reimbursement for other services like remote therapeutic care and chronic care management, while making slight adjustments to allowances for RPM.

These changes provide an opportunity for providers to extend their remote care offerings and take advantage of the increased reimbursement—while helping providers meet goals like improving clinical outcomes, enhancing patient engagement, and increasing efficiency and cost savings.

## Telehealth CPT Codes

CMS Guidelines: For evaluation and management provided in either a physician's office, other outpatient, or ambulatory setting. In addition, providers can bill for virtual visits using these codes along with 90 other CPT codes.

### Telehealth Visits

- **99202 – 99205, 99211 – 99215:** Office or other outpatient visits
- **G0425 – G0427:** Consultations, emergency department, or initial inpatient

### Virtual Check-Ins

- **G2010:** Remote evaluation of recorded video and/or images submitted by an established patient with follow-up within 24 business hours
- **G2012:** 5-10 minutes of technology-based communication by a physician or other qualified health care professional who can report evaluation and management services not originating from a related E/M service provided
- **G2252:** 11-20 minutes of technology-based communication by a physician or other qualified health care professional who can report evaluation and management services not originating from a related E/M service provided

# Telehealth CPT Codes Cont.

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## Virtual Check-Ins (For providers who cannot independently bill for E/M services)

- **G2250:** Remote assessment of recorded video and/or images submitted by an established patient with follow-up within 24 business hours
- **G2251:** 5-10 minutes of technology-based communication by a qualified health care professional

## Virtual Visit

- **99421 – 99423:** Online digital evaluation and management service, for up to 7 days, a cumulative time during the 7 days
- **G2061 – G2063:** Online assessment by qualified non-physician healthcare professional

## Telephone Services

- **99441 – 99443:** Evaluation and management by a physician or other qualified health care professional provided to a patient, parent, or guardian not originating from a related E/M service provided

## Interprofessional Telephone/Internet/Electronic Health Record Consultation

- **99446 – 99449:** Assessment and management service provided by a consultative physician
- **99451:** Assessment and management service provided by a consultative physician, 5 minutes or more of medical consultative time
- **99452:** Referral service provided by a treating/ requesting physician or other qualified health care professional, 30 minutes

## Telemedicine Services

- **G0406 – G0408:** Follow-up inpatient consultation via telehealth
- **G0425 – G0427:** Telehealth consultation, emergency department
- **G0508, G0509:** Telehealth consultation, critical care

## RPM CPT Codes

CMS Guidelines: For providing RPM services to patients, as well for staff time spent monitoring these patients. These actions are billable through five CPT codes:

- **99091:** Collection and interpretation of data by physician or QHCP, 30 minutes
- **99453:** Initial set-up and patient education
- **99454:** Supply of devices and collection, transmission, and summary of services
- **99457:** First 20 minutes of remote physiologic monitoring by clinical staff/MD/QHCP
- **99458:** For an additional 20 minutes of remote physiologic monitoring by clinical staff/MD/QHCP

The 2024 physician fee schedule added general care management code G0511 for rural health clinic or federally qualified health center (RHC or FQHC) only to bill for RPM or RTM (not both).

### Sample First Month RPM Billing

RPM CPT CODE	REIMBURSEMENT
99091	\$ 52.71
99453	\$ 19.65
99454	\$ 46.83
99457	\$ 48.14
99458	\$ 38.64
G0511	\$ 72.98
<b>TOTAL</b>	<b>\$ 205.97 - \$ 278.95</b>

## CCM CPT Codes

CMS Guidelines: For patients with two or more chronic medical conditions expected to persist for more than 12 months following diagnosis and place the patient at an increased risk for hospitalization.

- **99437:** Subsequent 30 minutes of care personally provided by physician or NPP
- **99439:** Subsequent 20 minutes of care provided by clinical staff
- **99487:** Minimum 60 cumulative minutes over a 30-day period of non-face-to-face consultation time establishing or monitoring a care plan
- **99489:** For every additional 30 minutes non face-to-face consultation (with 99487)
- **99490:** Minimum 20 minutes non-face-to-face consultation monitoring the care plan
- **99491:** Initial 30 minutes personally provided by physician, or non-physician

# RTM CPT Codes

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CMS Guidelines: Billable by practitioners who are not eligible to bill E/M services codes unlike providers who are eligible to bill E/M codes for RPM services.

- **98975:** Initial set up and patient education
- **98976:** 30 days supply of device(s) for monitoring respiratory system
- **98977:** 30 days supply of device(s) for monitoring musculoskeletal system
- **98980:** First 20 minutes of monitoring or treatment management services
- **98981:** Additional 20 minutes of monitoring or treatment management services

## About Health Recovery Solutions (HRS)



HRS is the leading healthcare technology company transforming quality care at home for the betterment of patients. We pair best-in-class clinical expertise, logistics, and analysis with the industry's most advanced remote care technology platform. Our digital tools and proven experience enable clinical decision-making earlier in the patient journey which, ultimately, improves patient and provider satisfaction while reducing costs and administrative burden for clinicians, hospitals, payors, and other healthcare organizations.

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