



# Your Guide to Boosting Revenue and Patient Retention with Remote Therapeutic Monitoring

By MedBridge



# Overview

If you're an outpatient rehab provider, you might have heard the buzz lately around remote therapeutic monitoring (RTM). But what is it, how does it work, and what is the value for your organization?

RTM allows providers to bill for the remote management of their patients with musculoskeletal and respiratory conditions using medical devices (including certain software) that collect non-physiological data, such as patient adherence and reported pain levels. Prescribing education and home exercise programs to patients is standard practice for rehab therapists, but until now, providers haven't been incentivized to interact with patients between sessions to monitor and encourage adherence to their home programs.

However, with the new CPT codes launched by CMS, you can now be reimbursed for collecting therapeutic data using the virtual patient engagement and monitoring techniques that many of your clinicians are already performing today—opening up new revenue streams of up to \$25,000 per provider per year.<sup>1</sup>

**MedBridge wants to help. In this guide, we'll provide the information you need to get started with RTM, including:**

- How the CPT codes are structured and when to use them.
- How to calculate your organization's reimbursement potential.
- Examples of RTM in action.
- What to look for in an RTM solution.

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## RTM at a Glance

### What is RTM?

RTM allows providers to bill for remotely managing their patients using certain medical devices or software that collect non-physiological data.

### Is RTM the same thing as RPM?

If you've heard of remote patient monitoring (RPM), you know that it's the use of digital technology to capture and analyze patients' *physiological data*, such as blood pressure, glucose levels, and lung function. By contrast, remote therapeutic monitoring focuses on *non-physiological data*, such as whether a patient is completing her exercises, whether she has any trouble with them, and how she feels afterwards.

### Who can bill for RTM?

According to CMS, physicians and other "eligible qualified healthcare professionals" are permitted to bill for RTM. While CMS says it expects the primary billers of RTM codes to be physiatrists, nurse practitioners, and physical therapists, other providers can use the codes as well, including occupational therapists and speech-language pathologists.

### What patients qualify?

Today, the CPT codes allow for remote monitoring of the musculoskeletal and respiratory systems only. However, if you are managing patients with other conditions for whom remote monitoring of those systems provides additional benefit or value, you could include RTM in their plan of care. This said, please note that some payers may not yet recognize these codes, which could result in increased financial responsibility for the patient.

### What constitutes an approved RTM device?

Providers billing RTM must be using technology that satisfies the FDA's definition of a medical device, which includes software used to diagnose, prevent, monitor, or treat health conditions. The MedBridge platform provides automated functionality to track, monitor, and report on patient engagement levels, experience, progress, and satisfaction with home exercise programs.



## Decoding the CPT Codes

Here's the most important information to know about the new RTM billing codes:

- The new RTM codes are divided into two categories: service codes and time-based RTM management codes.
- RTM service codes (98975, 98976, and 98977) reimburse for expenses associated with establishing RTM services, including initial device set-up and patient education, and the transmission of the data used to monitor the respiratory and/or musculoskeletal systems.
- RTM management codes (98980 and 98981) are monthly time-based codes that use the results of RTM to manage a patient under a specific treatment plan. This may include activities such as updating a program or a phone conversation with the patient.

### FAQ

RTM has inspired a high level of sustained interest from providers across settings. To address your most common questions, we created this two-part FAQ:

- [Remote Therapeutic Monitoring: Your Questions Answered, Part 1](#)
- [Remote Therapeutic Monitoring: Your Questions Answered, Part 2](#)



## RTM

The RTM management codes require that at least one interactive session have an audio component (either telehealth or a phone call).

# CPT Codes at a Glance

	CMS Definition	When to Use It	Estimated Payment <sup>2</sup>
98975	Remote therapeutic monitoring (e.g., respiratory system status, musculoskeletal system status, therapy adherence, therapy response), initial set-up, and patient education on use of equipment.	For initial patient education on the device itself and on the patient's care plan, including goal setting. You'll report this code only once per episode of care, and only if monitoring occurs over a period of at least 16 days.	\$19.58
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.	When monitoring a patient's respiratory system, and only if the monitoring occurs over a period of at least 16 days.	\$57.11
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.	When monitoring a patient's musculoskeletal system, and only if the monitoring occurs over a period of at least 16 days.	\$57.11
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.	For the first 20 minutes of treatment and updates.	\$49.66
98981	Remote therapeutic monitoring treatment management services, physician/other qualified healthcare 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.)	For each additional 20 minutes of treatment and updates.	\$39.90

**Please note:** The information in this guide is provided "as is" without warranty of any kind and is not guaranteed to be complete, accurate, or up to date. CMS codes and guidance are subject to change, and nothing in this material is intended as legal, billing, or regulatory advice. Responsibility for proper billing remains with the licensed practitioner and their advisors.

# Case Study: RTM in Action

What does RTM look like in action? Here's a case study based on a clinical example from American Physical Therapy Association (APTA):

Imagine that a physical therapist at your organization is seeing a patient with knee pain associated with osteoarthritis, impaired muscle performance, and decreased joint mobility. After an evaluation and two treatment sessions, the PT prescribes a home exercise program and a walking program, and advises the patient to apply ice to reduce inflammation and manage pain.

The PT also recommends that the patient use a monitoring device that will prompt him to perform the prescribed programs and gather patient-reported information such as pain levels, perceived exertion, use of ice, and confidence in performing the program. The PT provides the device and shows the patient how to use it.

After monitoring the patient's performance and response for two days and analyzing the transmitted data, the PT sees that the patient isn't performing one of his exercises and isn't using ice as prescribed. His self-reported pain levels indicate that pain remains a barrier for him. The PT gets in touch with the patient, reviews the exercise in question, and emphasizes the importance of using ice. Over the next 72 hours, the PT sees via the transmitted data that the patient is now performing all exercises, using ice as prescribed, and has decreasing pain. At the next in-person visit, the PT is able to progress the patient's program.

Remote therapeutic monitoring and management continues for 21 days within the same calendar month, accumulating a total of 25 minutes, and advances forward until the patient has achieved his goals.

## Reporting and Billing Breakdown

- Bill one unit of 98975 for the initial set-up and patient education in the use of the device, but bill only after monitoring has occurred for at least 16 days.
- Bill one unit of 98977 for provision of the monitoring device itself, but bill only after monitoring has occurred for at least 16 days.
- Bill one unit of 98980 if there was a total of more than 20 minutes of monitoring over 21 days in the calendar month, during which there was at least one instance of interactive communication with the patient.



1

### Provider Evaluation

1/1/22

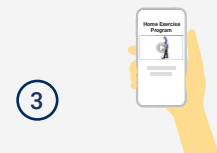


2

### Provider Action

1/17/22 (16 days later)

Provider can bill \$19.58



3

### Provider Engagement

1/21/22 (25 min total)

Provider can bill \$49.66

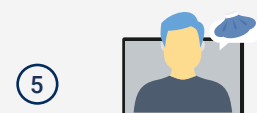


4

### Patient Engagement

2/1/22 (Patient logs data 16/30 days)

Provider can bill \$57.11

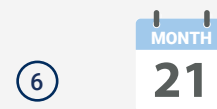


5

### Provider Engagement

2/15/22 (50 min total)

Provider can bill \$39.90



6

### Total Realized Revenue

\$166.25



## Calculate Your RTM Reimbursement Potential

Based on the rates above, we conservatively estimate average reimbursement for RTM to be approximately \$166.25 per patient episode.<sup>3</sup> This can add up quickly for a clinic with 20 physical therapists performing 10,000 evaluations per year, working out to \$423,937 per year in new revenue.

What does RTM revenue look like for your clinic?  
Here's how to find out:

	Sample based on industry standards	
Evals per year per provider	500	<input type="text"/>
Medicare mix	30%	X <input type="text"/>
30-day retention rate	85%	X <input type="text"/>
# of clinicians	20	X <input type="text"/>
<b>RTM Eligible Patients</b>	<b>2,550</b>	<input type="text"/>
Reimbursement per patient	\$166.25	X <input type="text"/>
<b>Total Reimbursement</b>	<b>\$423,937.50</b>	<input type="text"/>



Use the CPT codes chart on page 5 and the calculator example to adjust the expected reimbursement per patient as needed.



## Adopting an RTM Solution: A High-Level Overview

If you're considering implementing an RTM solution but not sure where to start, here's a bird's-eye view of the typical steps involved.<sup>4</sup>

- 1 Once an organization has decided to implement RTM, a manager or clinician determines what device to use.
- 2 The organization implements the new solution with their existing systems and processes, and trains teams on how to use it.
- 3 Clinicians enroll patients in an RTM program, assign a plan of care, and educate the patient on how to use the device/technology.
- 4 Clinicians begin to track therapeutic data such as patient adherence and feedback on pain and difficulty.
- 5 Clinicians analyze the therapeutic data, communicate with patients about their progress, and adjust the care program as needed to help optimize results.
- 6 Clinicians leverage the data collected by the RTM device/technology to report and bill for RTM.





## What to Look for in an RTM Solution

To improve patient outcomes while minimizing the administrative burden on your clinicians, it's important to find an RTM solution that provides ease of workflow, high-quality patient resources, an engaging patient platform, and effective patient tracking and monitoring. Here are some key features to look for:

- ✓ Streamlined patient enrollment, assignment, reporting, and tracking.
- ✓ The ability to easily identify opportunities for billing.
- ✓ A robust library of effective education and exercises.
- ✓ The ability to create care programs that integrate both education and exercises.
- ✓ A patient mobile app and the ability to assign care programs via text and email for better patient convenience and ease of use.
- ✓ Adherence tracking and pain/difficulty monitoring to help clinicians better understand patient behavior so that they can update programs to meet patient needs.
- ✓ Patient reminders and gamification to help improve patient engagement and adherence.
- ✓ Communication tools such as in-app messaging and telehealth.
- ✓ Education for providers on how to use telehealth and better engage patients remotely.
- ✓ EMR integration.
- ✓ HIPAA compliance.

 **9X**

the patient engagement rate when a program is assigned digitally vs. printed.

 **20%**

improvement in patient self-monitoring adherence when a digital app is used.<sup>5</sup>



## How MedBridge Can Help

Our Remote Therapeutic Monitoring Solution includes everything you need to digitally assign programs, monitor patient progress, communicate with patients, and accurately track for efficient RTM billing.

- Easily integrate RTM directly into your existing workflows.
- Quickly document and report on RTM patients with built-in analytics and dashboards.
- Capture additional revenue today.

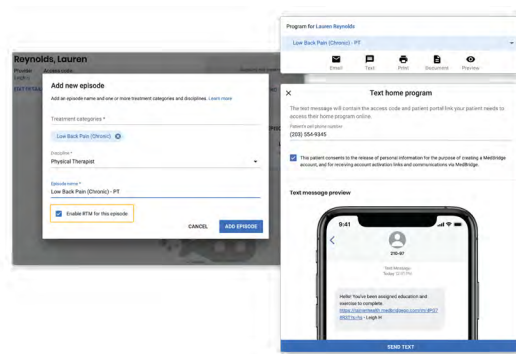
## How Our Solution Works

### CPT CODE 98975

#### Enroll Patients in RTM and Digitally Assign Home Programs

Enable RTM tracking by simply checking a box when you enroll and educate patients, then create and assign home programs via text or email.

*Report this code for initial set-up of program. This can be billed once and only after 16 days of monitoring.*

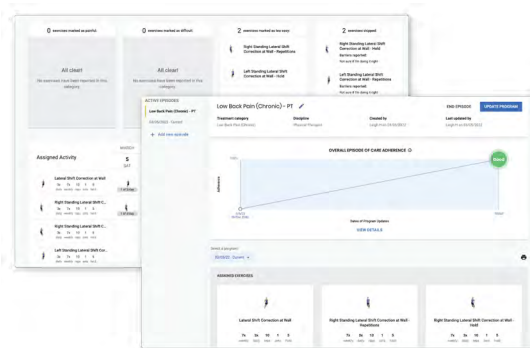


### CPT CODES 98976 AND 98977

#### Monitor Patient Progress

Monitor patients remotely through adherence tracking dashboards with pain and difficulty self-reporting.

*Report this code if monitoring occurs over a period of at least 16 days for respiratory (98976) or musculoskeletal (98977).*



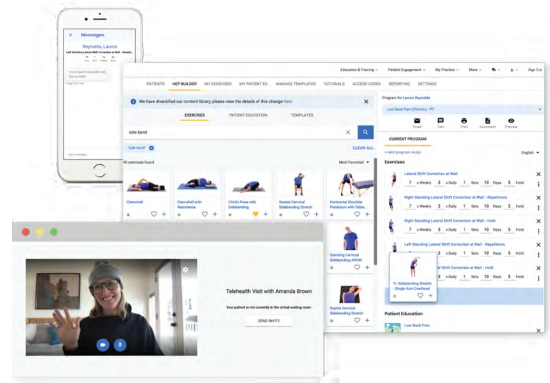
# How Our Solution Works

## CPT CODES 98980 AND 98981

### Remotely Communicate and Update Patient Programs

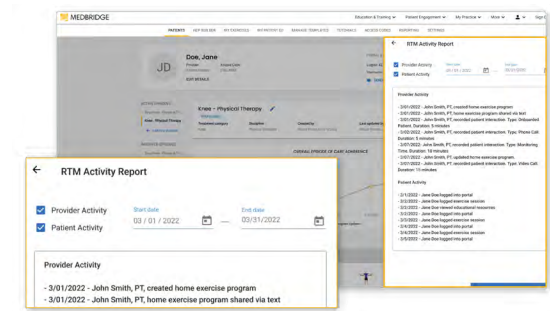
Update programs in real-time based on patient feedback and communicate between visits with in-app messaging or telehealth.

*Report these codes for every 20 minutes you spend reviewing remote monitoring data, updating programs, or communicating with a patient. Report (98980) for the first 20 minutes and (98981) for each subsequent 20-minute interval.*



### Report, Document, and Bill for RTM

Document and bill for RTM with insights from the activity logging and patient-level reporting dashboards.



## Notes

- 1 Assuming 500 evaluations per provider per year with an industry average 30 percent payer mix.
- 2 Regional variances to fee schedules may cause these rates to slightly vary per organization.
- 3 CPT reimbursement code rates (as shown in the chart CPT Codes at a Glance) equate to \$166.25 per patient per calendar month.
- 4 For providers who are already monitoring their patients remotely, the administrative side of RTM should take about one extra hour of work each week. This calculation is based on the following equation: (# evaluations per month per provider) x (Medicare payer mix) x (20 minutes, the average time it takes a clinician to perform RTM tasks for a single patient).
- 5 Lee, K., Kwon, H., Lee, B., Lee, G., Lee, J. H., Park, Y. R., & Shin, S.-Y. (2018). Effect of self-monitoring on long-term patient engagement with mobile health applications. PLOS One, 0201166.



## ABOUT MEDBRIDGE

Founded in 2011, MedBridge is an innovator at the intersection of healthcare technology, education, and patient engagement. We have helped more than 2,500 healthcare organizations grow their business, elevate their workforce, and deliver exceptional patient experiences. For more information, visit [medbridgeeducation.com](https://medbridgeeducation.com).

See how MedBridge can help your organization.

[Contact us to request a demo.](#)