

➤ Kentucky Telehealth Summit Remote Patient Monitoring

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Presentation Goals

At the end of the session, participants will be able to:

- Understand the role of RPM in transforming patient care.
- Articulate Appalachian Regional Healthcare's RPM program's financial outcomes.
- Articulate CMS's new RPM CPT Codes.



➤ Remote Patient Monitoring

The goals of RPM are:

- Patients make long term behavior change.
- Improve patient clinical outcomes.
- Lower health care costs.





Weight Scale

Individual weighs after waking and voiding.



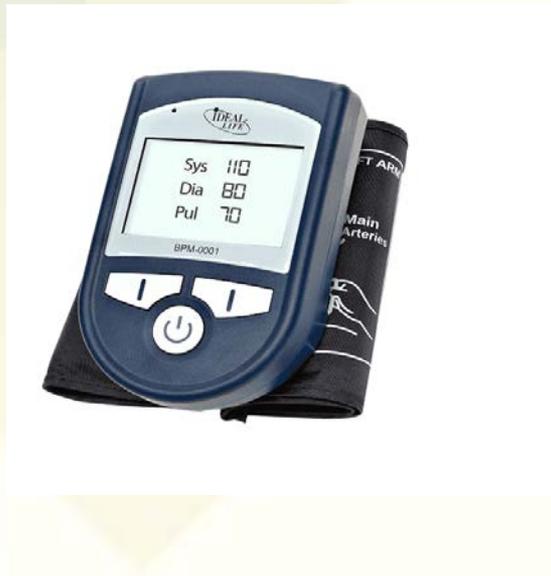
➔ Glucometer

Individual takes fasting blood glucose, takes DM medications, eats their breakfast.



➤ Blood Pressure/Pulse Meter

Individual takes BP reading 1 hour after taking medications & resting in chair for 15 minutes.
Encourage patient to check 2 consecutive BP readings





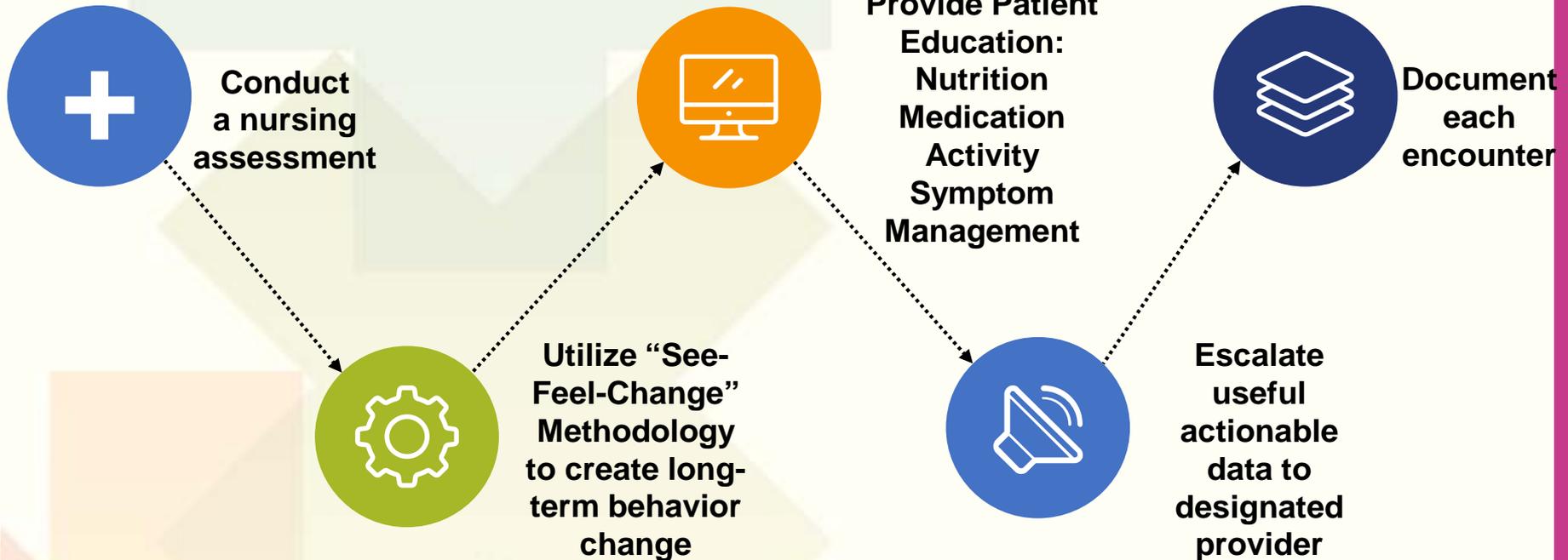
Pulse Oximeter

Individual takes O2 saturation reading after checking their BP and resting.



➤ CLINICAL MONITORING WORKFLOWS: NURSING INTERVENTIONS AND EDUCATION

When alerts are valid, an RN will:



➤ Focus of the ARH RPM Program

- Reduce < 30 day readmissions, IP admissions, and ED visits for patients with:
 - Heart Failure
 - Hypertension
 - Chronic Obstructive Pulmonary Disease
 - Diabetes.
- Implement and refine key processes.
- Evaluate outcomes.



➤ IP Hospitalization Data Analysis Methodology

Data evaluated and presented include:

- # hospital IP admissions 30 days before RPM compared to 1st 30 days of monitoring
- % change in hospital IP admissions 30 days before RPM compared to 1st 30 days of monitoring

Based on the data, we calculated:

Total IP Charges 30 days prior to RPM

Total IP Charges 1st 30 days of monitoring





ARH Data by Hospital

	Hazard ARH	Harlan ARH	Whitesburg ARH
# of RPM patients	105	16	24
# IP 30 days prior	125	15	33
# IP 1 st 30 days	64	7	23
# IP avoided	61	8	10
Charges 30 days prior	\$999,382	\$74,341	\$347,917
Charges 1 st 30 days	\$466,503	\$28,899	\$104,502
Charges avoided	\$532,879	\$45,442	\$243,415





ARH Totals

# of RPM patients	145
# IP 30 days prior	173
# IP 1st 30 days	94
# IP avoided	79
Charges 30 days prior	\$1,421,640
Charges 1st 30 days	\$599,904
Charges avoided	\$821,736





Medicare Telehealth Services vs RPM Services

Medicare Telehealth Services- interaction between a provider and a patient via communications technology.

Billed as an in-person encounter

Must meet geographic restrictions

Must meet originating site restrictions

RPM are services that are defined by and involve the use of communication technology.

RPM are services that are not provided during an in-patient visit.

No geographic or originating site restrictions



➤ Chronic Care Remote Physiologic Monitoring

Patients collect bio-metric data remotely & data is transmitted for review.

Patient bio-metric data includes:

Weight

Blood Pressure

Heart Rate

Pulse Oximetry

Medicare patients with chronic conditions.



➤ RPM CPT Code 99453

Remote monitoring of physiologic parameters: Initial set up

Examples of data: Weight, BP, pulse oximetry, respiratory rate

Initial Set up

Patient education on equipment use

Reimbursement for the practice expense associated with furnishing RPM thus no physician work is required to bill

Reimburses: \$17.10 per set up



➤ RPM CPT Code 99454

Remote monitoring of physiologic parameters:

Device supply with daily readings or programmed alerts transmission, each 30 days.

Reimbursed for the practice expense associated with furnishing RPM thus no physician work is required to bill

Reimbursement \$56.43 PPM



➤ RPM CPT Code 99457

Remote physiologic monitoring treatment management services:

Alternative to billing 99091 for professional services associated with RPM.

20 minutes or more of clinical staff/physician/other qualified healthcare professional time in a calendar month requiring interactive communication with the patient/caregiver during the month

Reimbursement: \$47.90 PPM



Questions



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