

## **2025** Billing Updates for Remote Monitoring of Patients

The Centers for Medicare and Medicaid Services (CMS) released the CY 2025 Physician Fee Schedule (PFS) Final Rule in November 2024, which included detailed policy changes related to remote physiological monitoring (RPM) and remote therapeutic monitoring (RTM) Medicare reimbursement for tracking patient data. RPM, with codes 99453, 99454, 99457, 99458, and 99091, focuses on monitoring vital signs and preventing health issues. RTM, with codes 98975, 98976, 98977, 98980, and 98981, focuses on monitoring non-physiological health factors like patient-reported symptoms, medication adherence, and response to treatment. The 2025 billing updates emphasize the significance of these remote care services and provide healthcare providers with new revenue streams.

## Key Changes for 2025

Here is an overview of the fundamental changes that impact remote monitoring of patients in the final rule for Medicare reimbursement under the PFS, effective January 1, 2025. See below for the summarized updates:

- 1. Data Collection Period:
  - CMS has reiterated that, following the COVID-19 Public Health Emergency (PHE), at least 16 days of data must be collected and transmitted within a 30-day period to meet the requirements for billing RPM CPT codes 99453 and 99454. For RTM CPT codes 98975, 98976, and 98977, the RTM device must monitor at least 16 days of data per each 30-day period to meet the billing requirements.
- 2. Device Standards:
  - The medical device used for RPM services must be a device as defined by Section 201(h) of the Federal Food, Drug, and Cosmetic Act. The device must be reliable, valid, and capable of automatically collecting and transmitting physiologic data; self-reported data is not sufficient.
- 3. Eligible Providers:
  - Only physicians and non-physician practitioners (NPPs) eligible to furnish Evaluation and Management (E/M) services may bill for RPM services.
- 4. Applicable Conditions:
  - RPM services may be considered medically necessary for patients with both acute and chronic conditions, broadening the scope of patients who can benefit from these services.
- 5. Interactive Communication:
  - For CPT codes 99457 and 99458, "interactive communication" is defined as a real-time conversation that includes synchronous, two-way interactions, which can be enhanced with video or other data. The required 20 minutes of time can include furnishing care management services as well as the interactive communication.
- 6. General Supervision for RTM Services:
  - CMS has clarified that RTM services can be furnished under general supervision, allowing auxiliary
    personnel to provide these services under the general supervision of the billing practitioner. This
    flexibility aims to enhance the delivery of RTM services by enabling a broader range of healthcare
    professionals to participate in patient monitoring.

## RPM Reimbursement Requirements

The reimbursement requirements for Remote Physiologic Monitoring CPT codes in 2025 include the following key points in the table below. In summary, providers can bill for RPM and RTM services in 2025 if they adhere to these requirements, ensuring the use of compliant devices, patient consent, proper evaluations, and adherence to specific usage and data collection standards.

Requirement	Description		
FDA-Compliant RPM Device	The RPM device used must adhere to the FDA's definition of a medical device		
Patient Opt-In	Patients are required to opt-in for the remote patient monitoring service before receiving the RPM device		
New Patient Evaluation	A new patient evaluation is necessary for patients who are new to RPM or RTM		
Continuation for PHE Enrollees for RPM	Patients already enrolled in RPM during the Public Health Emergency (PHE) can continue receiving RPM services.		
Continuation for PHE Enrollees for RTM	There is no automatic continuation of services for RTM patients unless those services are still deemed medically necessary for the patient's ongoing therapeutic care.		
Minimum Usage for Billing	For RPM CPT codes 99453 and 99454, patients must use the RPM device for at least 16 days in a 30-day period.		
	For RTM CPT codes 98975, 98976, and 98977, the RTM device must monitor at least 16 days of data per each 30-day period to meet the billing requirements.		
	* <b>Note</b> * An RPM device usage day can count for RTM CPT code billing. RTM device usage days <b>CANNOT</b> be used when submitting for RPM reimbursement.		
HIPAA-Compliant Data Collection	Data collection processes must comply with the Health Insurance Portability and Accountability Act (HIPAA)		

## 2025 Reimbursement Rates

For 2025, the reimbursement rates are expected to be slightly adjusted, following the changes in the overall PFS conversion factor. The CY 2025 PFS conversion factor is set at \$32.35, a decrease of \$0.94 (or 2.83%) from the CY 2024 conversion factor of \$33.29. This reduction is expected to proportionally decrease reimbursement rates for services billed under the PFS, including the specified RPM CPT codes.

RPM CPT Reimbursement Rates – 2025	5
------------------------------------	---

RPM CPT Code	2024 Rate	2025 Rate	Change
99453	\$ 19.65	\$ 19.73	\$ 0.08
99454	\$ 46.83	\$ 43.02	\$ (3.81)
99457	\$ 48.14	\$ 47.87	\$ (0.27)
99458	\$ 38.65	\$ 38.49	\$ (0.16)
99091	\$ 52.71	\$ 52.71	\$ 0.00