

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

MARYLAND MEDICAL ASSISTANCE PROGRAM Remote Patient Monitoring Transmittal No. 1 January 10, 2018

TO:	Clinics Federally Qualified Health Centers Hospitals Managed Care Organizations
FROM:	Susan J. Tucker, Executive Director Office of Health Services
RE:	Reimbursement for Remote Patient Monitoring Services Provided through Physicians, Nurse Practitioners, and Physician Assistants Effective January 1, 2018
NOTE:	Please ensure that the appropriate staff members in your organization are informed of the content of this transmittal.

Effective January 1, 2018, the Maryland Department of Health (MDH) will reimburse for remote patient monitoring (RPM) services for certain chronic conditions.

RPM is a service which uses digital technologies to collect medical and other forms of health data from individuals and electronically transmits that information securely to health care providers for assessment, recommendations, and interventions. Providers should order RPM when it is medically necessary to improve chronic disease control and it is expected to reduce potentially preventable hospital utilization.

Preauthorization Requirements

Medicaid participants diagnosed with one of the following conditions may qualify for RPM:

- Chronic Obstructive Pulmonary Disease (COPD);
- Congestive Heart Failure; or
- Diabetes (Type 1 or Type 2).

To receive RPM, the participants must be enrolled in Medicaid, consent to RPM, have the internet connections and capability to use the monitoring tools in their homes, and have had one of the following scenarios within the most recent 12-month period:

- Two hospital admissions with the same qualifying medical condition (COPD, congestive heart failure, or diabetes) as the primary diagnosis;
- Two emergency department visits with the same qualifying medical condition as the primary diagnosis; or
- One hospital admission and one emergency department visit with the same qualifying medical condition as the primary diagnosis.

Referrals for RPM may cover an episode of up to 60 days of monitoring. Eligible participants may only receive two episodes of RPM during a rolling 12-month period.

Providers can prescribe RPM; however, the authorization limits apply across provider types. Therefore, a participant cannot receive two episodes of RPM from a home health agency and two episodes of RPM from another provider during a rolling 12-month period.

The preauthorization form is available at <u>https://mmcp.health.maryland.gov/Pages/RPM.aspx</u>.

<u>RPM Reimbursement</u>

HCPCS code **S9110** will be reimbursable for RPM. The RPM rate is an all-inclusive rate of \$125 per 30 days of monitoring, which covers:

- Equipment installation;
- Participant education for using the equipment; and
- Daily monitoring of the information transmitted for abnormal data measurements.

The rate does not include and Medicaid will not pay for:

- RPM equipment;
- Upgrades to RPM equipment; or
- Internet service for participants.

The criteria outlined are for fee-for-service participants receiving RPM. Managed care organizations may preauthorize and reimburse differently for HealthChoice participants. Please contact HealthChoice MCOs for more information about their RPM requirements.

Preauthorization for RPM should be faxed to Monasha Holloway at 410-333-5050. If there are questions regarding the preauthorization process for RPM, please contact Monasha at 410-767-1737 or at <u>monasha.holloway@maryland.gov</u>.

Note: Billing and preauthorization procedures for home health agencies are covered under a separate transmittal.