

REMOTE PATIENT MONITORING E-BOOK

**MAKING A DIFFERENCE IN PATIENT CARE
WHILE IMPROVING CLINIC NET INCOME**

Don Self, CASA, CMCS, CPC

STAYING CONNECTED IS VITAL



Caregiver/Home health agency



Doctor/ Physician



Patient Measurements



WHAT IS REMOTE PATIENT MONITORING?

RPM is also called Remote Physiologic Monitoring. Clinicians have been remotely monitoring patients for decades. RPM, in its purest form, is using mobile devices and technology to obtain automatically generated patient data which is then sent to the clinician for review.



WHY DOES MEDICARE & INSURANCE COMPANIES ENDORSE RPM?

RPM

- **SAVES LIVES**
- **REDUCES HEALTHCARE COSTS**
- **IMPROVES PATIENT CARE**

* KLAS REPORT

- **38% REDUCED HOSPITAL ADMITS**
- **25% REDUCED RE-ADMITS**
- **25% REDUCED E.R. VISITS**
- **13% IMPROVED MED COMPLIANCE**
- **13% IMPROVED PATIENT HEALTH**
- **8% DECREASED A1C LEVELS**



*KLAS RESEARCH, 2016-2019 Study on Remote Patient Monitoring

PURPOSE OF RPM

Basically, the purpose of RPM is to improve the communication of data between the patient and their medical provider. The primary reason is to improve health outcomes. RPM allows the provider to monitor and track the vital signs or physiologic readings of the patient. This can be to address specific problems or for prevention purposes. The more closely a provider is able to monitor, the quicker the identification of when an intervention is needed. This not only improves patient outcomes but it also leads to reduced healthcare costs



IS RPM BETTER THAN SELF REPORTING?

My Blood Pressure Log



Try these tips for keeping track of your blood pressure at home:

- Always take your blood pressure at the same time every day.
- Take at least two readings, 1 or 2 minutes apart.
- Visit [cdc.gov/bloodpressure](https://www.cdc.gov/bloodpressure) to learn how to correctly measure your blood pressure.

Date	Morning			Evening		
	Time of reading	Reading 1	Reading 2	Time of reading	Reading 1	Reading 2
Feb. 1, 2020	8 a.m.	139/82	141/82	6 p.m.	145/85	142/85

For more than half a century, medical providers have relied on patients keeping a chart at home on their blood pressure or glucose.

While some patients are diligent in taking their measurements and bringing those into the office, there are an equal number who either forget or they “fudge” the numbers to avoid disappointing their medical provider.

RPM allows the medical provider to get the true numbers in a timely fashion - when time really matters, instead of waiting for the next quarterly or semi-annual medical visit.



HOW DO THE PATIENTS BENEFIT FROM RPM?

Besides the obvious benefit of improved patient health outcomes and reduced healthcare costs, there are other merits of RPM.

Access to healthcare is a major benefit. Due to the shortage of healthcare providers, the wait times to get into the clinic for an appointment seems to be getting larger. On top of that, we have the aging population experiencing travel difficulties and delays getting to see their primary care providers.

Enhanced Patient Accountability is another benefit, as some patients are more likely to test on a daily basis if they know their medical provider is not only expecting it, but having staff check it. Patient peace of mind comes from the patient knowing their medical provider is monitoring their numbers to catch fluctuations quickly.

Patient education has been an unexpected benefit that we've seen in the years since RPM began. Patients are seeing how their medical providers titrate medications based on their numbers, and this leads to higher compliance rates with patients.

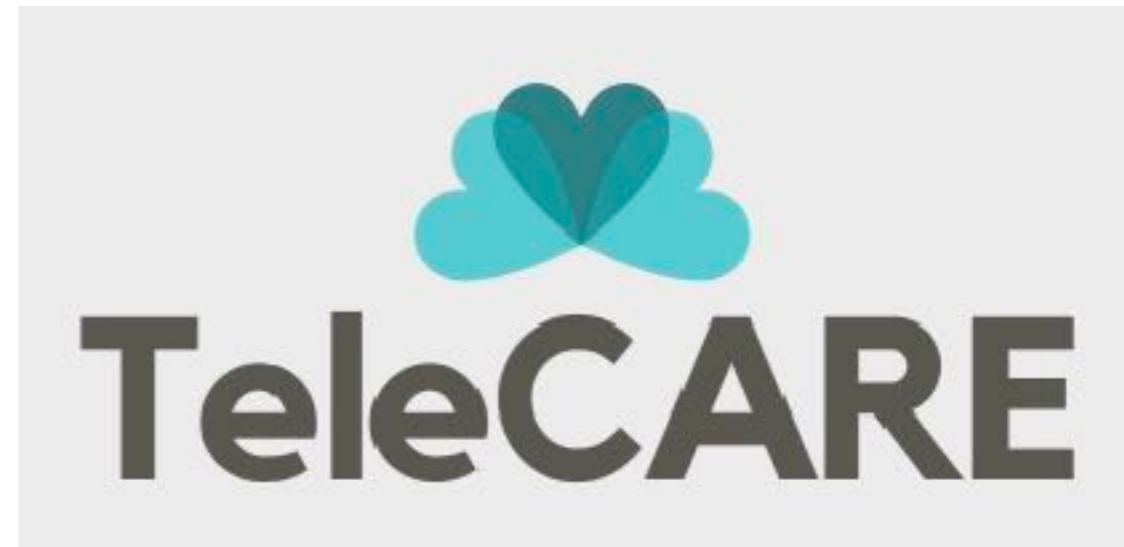
Improved Compliance in the areas of RPM not only lead to patients doing a better job of taking their medications as prescribed, but the other areas as well. Patient exercise and increased activity increases when the patient can see how it directly affects their physiologic readings each day, thereby leading to improved health.

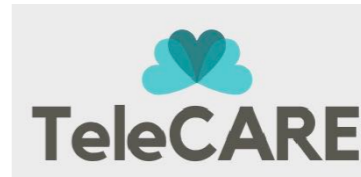
Fewer disease exacerbations, improved quality of life, reduced hospital admissions and reduced Emergency Department use are additional benefits that patients experience when they are receiving remote patient monitoring.

HOW DOES THE CLINIC BENEFIT FROM RPM?

**RPM IS EXTREMELY PROFITABLE
WHEN DONE CORRECTLY**

Similar to adoption of medical technology, there are incorrect and correct ways to begin the process. Some offices have avoided RPM because they believed it to cost tens of thousands in supplies and increased staffing. Others have found an easier approach that allowed them to provide the benefit to their patients and their clinic without buying equipment or putting additional workloads on their staff by using companies such as Telecare-USA.





RPM REIMBURSEMENT

MOST INSURANCE PAYS SUPER WELL

Medicare started paying for CPT codes 99453, 99454 and 99457 in January 2019 and today, the average USA Medicare allowed amounts are shown on the right.

In 2020, Medicare added code **99458** for each additional 20 minutes of monitoring (this is a mid-point code) and in 2021, the average allowed is **\$42.28**.

Starting in 2020, almost every commercial insurance company in the country also started paying for these 4 codes (they took a year to follow Medicare's lead), so today, the average monthly reimbursement amounts range from **\$118 to \$160** on Medicare and **\$141 to \$210** for non Medicare patients (depending on the contract the provider has with the company)

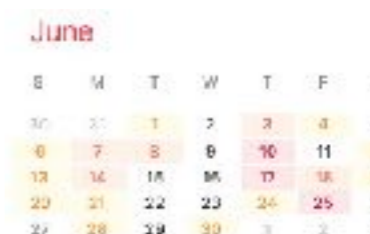
99453: \$19.96

Patient setup and education (5 min)



99454: \$65.83

Provision of device/supplies, with min. 16 days of transmission



99457: \$52.48

Management of rpm, requires at least 20 minutes of work time

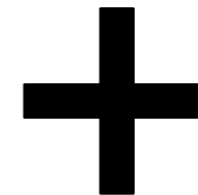


WHO SHOULD I TRUST?

For more than 3 decades, tens of thousands of providers have relied on Don Self & Associates for reimbursement advice. By using Telecare-USA, you get the best of two companies.

Telecare-USA provides the RPM system to medical providers on a month-to-month basis, at a cost that leaves big profits to the practice.

While other companies expect your current medical staff (MA's, nurses, etc) to add the monthly 20 minute monitoring onto their already busy schedule, Telecare-USA provides that service for you. Since November 2019, CMS classified the RPM codes into the same category as Chronic Care Management, thereby allowing us to provide the service - instead of your busy staff.



**AN ALL IN
ONE-SOLUTION**

CAN YOU BILL RPM & CCM IN THE SAME MONTH??



One of the most common questions we get asked is whether billing RPM precludes you from billing Chronic Care Management, Transitional Care Management, office visits or other services.

RPM does not stop a medical provider from billing any of these other services. It is important to note that you cannot “double-count” the time spent on RPM codes 99457 or 99458 with chronic care management performed in the same month. Most of the clients of Telecare-USA have allowed us to help them with both RPM and CCM.

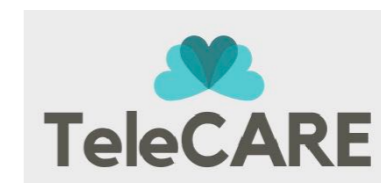


WILL TELECARE-USA DO RPM ON A PERCENTAGE BASIS?

Having taught hundreds of seminars and webinars on the reimbursement subjects for more than 3 decades, including Medicare and CMS compliance, we do NOT get involved in percentage billing arrangements.

It is our view, as well as most healthcare attorneys familiar with Stark, State fee-splitting laws and other regulations, that percentage billing could be considered illegal.

Remember - it will not be the RPM company the OIG or DOJ seeks to prosecute and the attorneys at the RPM company are hired to protect them - not you.



MONITORS TELECARE-USA PROVIDES

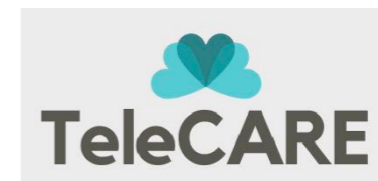


P20B

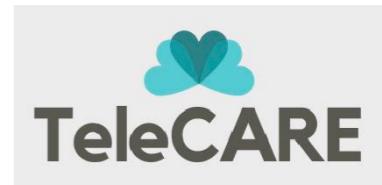
Blood Pressure Monitoring System

- Bluetooth enabled
- Multiple Patients - same device
- English/Spanish/Chinese

Send one device home for up to 4 patients in their household.



MONITORS TELECARE-USA PROVIDES



D40G

Blood Pressure Monitoring System

- No internet/bluetooth/smart phone needed
- 2-in-1 blood glucose and blood pressure measurements
- Audible results in English/Spanish
- Alternative site testing approved in blood glucose measurement
- Smart Averaging Technology (AVG Mode)
- Irregular Rapid Beat (IRB) technology
- 4G cellular connectivity
- Includes strips, lancets and lancet device when used for glucose monitoring



One device monitors both glucose & blood pressure. Especially useful for the patient without a smart phone.

MONITORS TELECARE-USA PROVIDES

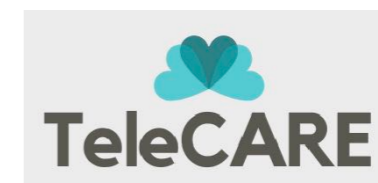


V10 BLE

Blood Glucose Monitoring System

- Bluetooth connectivity
- Audible results in English/Spanish/Chinese
- No coding required
- Alternative site testing approved
- Easy-slide strip ejector
- 4 alarm settings
- Includes strips, lancets and lancet device

Easily fits in pocket or purse and data is easily accessed via the patient's smart phone



MONITORS TELECARE-USA PROVIDES

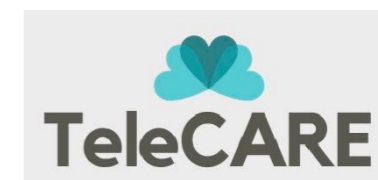


Scale 550

Weight Scale

- Supports up to 550 lbs
- Low profile
- Wide platform
- Large LCD display
- Audible results in English/Spanish/French

Congestive Heart Failure (CHF) patients have reduced mortality, fewer hospitalizations and lower direct costs when monitored daily.

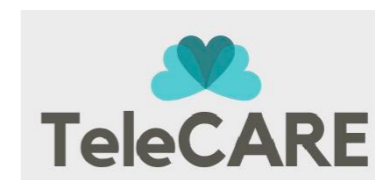


MONITORS TELECARE-USA PROVIDES

SpO2 Pulse Oximeter



- Easy one-touch operation
- Comfortable rubber finger sensor
- Large rotating LCD screen
- Bluetooth connectivity



WHERE DOES THE DATA GO?

INTO THE CLOUD



HIPAA SECURE

FORA 24/7 HealthView Telehealth Cloud

Manage data in a private and confidential environment

Using wireless technology, the HIPAA-compliant 24/7 HealthView System provides tools that empower healthcare professionals to remotely monitor patient conditions—effectively leading to better patient outcomes.



DOES TELECARE- USA SELL THE DEVICES TO US?

WE PROVIDE THE FULL SYSTEM

Telecare-USA does not sell the devices. We provide a full system including the monthly rental of the monitoring devices, training, support, data portal and even the patient monitoring itself.

We do this for less money than many companies who only provide devices.

For those practices that have already bought their own monitors, we are usually able to provide the monitoring as well.

Our system is a month-to-month agreement.

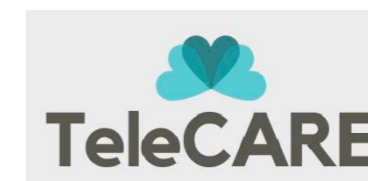


SHOW ME THE SOFTWARE

DASHBOARD VIEW

Dashboard							Last Updated: 05/25/2021 11:47 AM
Latest Test Data by Date/Time							
Patient ID	Name	Measurement Date	Measurement Period	Data	Upload Date/Time		
demopt	David Luna	06/20/2018 08:00 AM (Incorrect Upload Date/Time)	Wake up	Systolic Pressure: 118 Diastolic Pressure: 76 Pulse: 80	05/25/2021 01:37 AM		
demopt	David Luna	06/20/2018 08:02 AM (Incorrect Upload Date/Time)	Before-Breakfast	Blood Glucose: 202	05/25/2021 01:21 AM		
demopt	David Luna	06/20/2018 08:00 AM (Incorrect Upload Date/Time)	Wake up	Systolic Pressure: 109 Diastolic Pressure: 87 Pulse: 80	05/25/2021 01:21 AM		
demopt	David Luna	06/20/2018 08:00 AM (Incorrect Upload Date/Time)	Wake up	Systolic Pressure: 116 Diastolic Pressure: 83 Pulse: 80	05/25/2021 01:11 AM		
demopt	David Luna	06/20/2018 08:01 AM (Incorrect Upload Date/Time)	Before-Breakfast	Blood Glucose: 302	05/25/2021 12:53 AM		

RED IS **HIGH**, GREEN IS **WITHIN NORMAL LIMITS (WNL)**

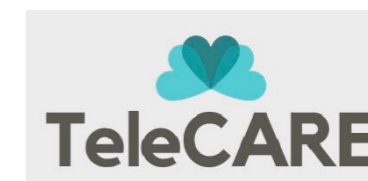


SHOW ME THE SOFTWARE

WEEKLY VIEW

Measurement Date	Wake-Up 06 AM – 08 AM			Morning 08 AM – 11 AM			Noon 11 AM – 02 PM			Afternoon 02 PM – 06 PM			Evening 06 PM – 09 AM		
	Systolic Pressure	Diastolic Pressure	Pulse	Systolic Pressure	Diastolic Pressure	Pulse	Systolic Pressure	Diastolic Pressure	Pulse	Systolic Pressure	Diastolic Pressure	Pulse	Systolic Pressure	Diastolic Pressure	Pulse
07/25/2019													105	53	84
													129	62	61
07/24/2019													117	71	66
													120	62	96
07/23/2019				111	59	53							105	61	82
07/22/2019													121	60	96
													114	54	157
07/21/2019										128	67	138	122	66	144
07/20/2019				106	53	139							118	51	156
07/19/2019	123	60	92										120	52	177
Average	123	60	92	108.5	56	96				128	67	138	117.1	59.2	112

WEEKLY AVERAGES, PER TIME OF DAY TO HELP TITRATE MEDICATIONS



SHOW ME THE SOFTWARE



MULTIPLE WEEK VIEW

Measurement Date	Wake-Up 06 AM - 07 AM	Breakfast Breakfast		Lunch Lunch		Dinner Dinner		Bedtime 08 PM - 10 PM	Midnight 10 PM - 06 AM
		Before-Meal 07 AM - 09 AM	After-Meal 09 AM - 11 AM	Before-Meal 11 AM - 01 PM	After-Meal 01 PM - 05 PM	Before-Meal 05 PM - 07 PM	After-Meal 07 PM - 08 PM		
07/26/2016		100		64	153				
07/25/2016					115				218 80
07/24/2016		78			106				143
07/23/2016	196				216 89				
07/22/2016					144 91				64
07/21/2016		193					160 201		
07/20/2016					166 137				197
Average	196	123.6		64	135.2		180.5		140.4

Date Range: 07/13/2016 - 07/19/2016 (Last 254 Week)

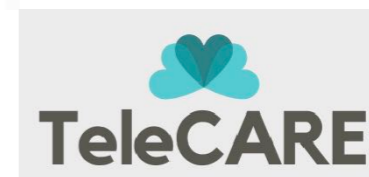
Measurement Date	Wake-Up 06 AM - 07 AM	Breakfast		Lunch		Dinner		Bedtime 08 PM - 10 PM	Midnight 10 PM - 06 AM
		Before-Meal 07 AM - 09 AM	After-Meal 09 AM - 11 AM	Before-Meal 11 AM - 01 PM	After-Meal 01 PM - 05 PM	Before-Meal 05 PM - 07 PM	After-Meal 07 PM - 08 PM		
07/19/2016							146		165 202
07/18/2016			105					183	184
07/17/2016				74					214 114
07/16/2016	118				121				87
07/15/2016	172		117		190				
07/14/2016			181						60 69
07/13/2016					113	114			170
Average	145		134.3	74	141.3	114	146	183	140.4

SHOW ME THE MONEY

FAMILY PHYSICIAN WITH 450 PART B PATIENTS

		FFCPT 20 min	FFCPT 30 min
NET PROFIT P/ HTN, COPD, CHF PT		\$ 72.06	\$ 114.34
NET PROFIT PER DIABETIC PT		\$ 60.21	\$ 102.49

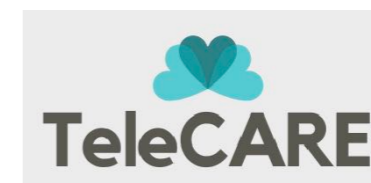
2021 CPT CODES	Work RVU	Medicare Allowed	Medicare NP Allowed
99453: Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment	0.00	\$ 19.96	\$ 16.97
99454: Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate), initial; device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days, 16 day minimum	0.00	\$ 65.83	\$ 55.96
99457: Remote physiologic monitoring treatment management services, 20 minutes or more of clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month	0.61	\$ 52.48	\$ 44.61
99458: Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; each additional 20 minutes	0.61	\$ 42.28	\$ 35.94
Calculated using only Part B MPFS for:	0	Monthly Medicare Allowed	\$ 118.31
# OF PART B PATIENTS, PER MEDICARE	% OF PTS W HYPERTENSION	% OF PTS W DIABETES	# OF HTN PTS
450	75%	45%	338
50% of Hypertension Patients	169	50% of Diabetic Patients	99
MEDICARE PT NET PROFIT		HTN, O2, COPD	DIABETIC
MONTHLY NET PROFIT		\$ 8,944	\$ 8,054
ANNUAL NET PROFIT		\$ 107,325	\$ 96,645



WHAT IS THE PROCESS?

SUPER SIMPLE!

- Clinic schedules Zoom call at WWW.DONSELF.COM
- Clinic signs one page agreement and BAA
- Clinic completes protocol page and orders devices needed
- Devices shipped from Telecare-USA warehouse to clinic
- Telecare-USA staff trains clinic staff via Zoom video call
- Clinic shows patients how to test & patient takes device home
- As patient tests, data is sent into HIPAA protected portal
- Either clinic staff or Telecare-USA staff monitors test results
- At first of month, Telecare-USA sends billing report to clinic biller for claims processing
- As clinic needs more monitors, they send request to Inventory Control Specialist at Telecare-USA and monitors are mailed to clinic



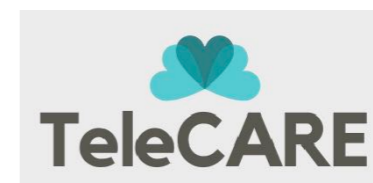
IS THERE A MINIMUM # OF MONITORS?

3 MONITOR MINIMUM

You may want 1 bluetooth blood pressure monitor, 1 glucose monitor and a combination monitor that does both, and that is fine with us.

Some of our clients start with 3, some with 10 and some have started with 25.

If you get to the point where you want to go invest \$50,000 and buy your own monitors, that is ok also. Just send our devices back to us and we won't bill you any longer. It really is that simple.



**GET STARTED
THIS WEEK**

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WWW.DONSELF.COM

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TeleCARE

