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RTM Codes: What Rehab Providers Need to Know

April 6, 2022


Moderator:

- Christie L. Sheets, COC, CPB, NARA Executive Director

Panelists:

- Joseph Brence, PT, DPT, MBA, FAAOMPT, MedBridge
- Raz Evenor, Owlytics Healthcare
- Renee Kinder, MS, CCC-SLP, RAC-CT, Broad River Rehab
- Jessica Zeff, Net Health

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The information shared in today’s presentation is shared in good faith and for general information purposes only. It is accurate as of the date and time of this presentation. Providers should seek further guidance and assistance from CMS and their Medicare Administrative Contractor (MAC), and state and national associations, legal or other professional advisors and continue to watch for new developments and information regarding the topics discussed today.

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Housekeeping Reminders

- All attendees are on mute
- Handouts were provided in the reminder email for this webinar sent 1 hour ago
- **Questions for Speakers:** submit them using the Q&A button on the attendee control panel
- **Technical Questions:** submit them using the Chat button on the attendee control panel
- **Recording:** will be emailed to all registered attendees 48 hours after concluded; posted for NARA Members on the Portal within 24 hours

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AGENDA

- Introduction of Panelists
- Introduction of RTM Codes – Renee Kinder
- RTM Top Questions Answered
- Vendor Solutions
- Attendee Q&A

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PANELISTS

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What is Remote Therapeutic Monitoring RTM?

- Remote Therapeutic Monitoring (RTM) is a family of five codes created by the CPT Editorial Panel in October 2020 and valued by the RUC at its January 2021 meeting — Remote Therapeutic Monitoring/Treatment Management CPT codes 98975, 98976, 98977, 98980 and 98981.
- The RTM family includes three PE-only codes and two codes that include professional work — 98980 and 98981

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History and Background

- CMS notes that they questioned in the proposed rule whether the RTM codes as constructed could be used by therapists because the Medicare benefit does not include services provided incident to the services of a therapist.
- Furthermore, they stated they viewed the clinical labor described in the RTM codes as being services incident to the billing practitioner's professional services. In the proposed rule they focused on therapists as providers of RTM services because we heard from stakeholders that the codes were developed in response to the needs of physical therapists.
- They go on to note that speech-language pathologists, clinical social workers, registered dietitians, nutrition professionals and CRNAs also have Medicare benefits that do not include incident to services.
- Therefore, they state, *"Despite our concerns about the construction of the codes, we believe the services described by the codes are important to beneficiaries."*
- *Thus, we are finalizing a policy that permits therapists and other qualified healthcare professionals to bill the RTM codes as described."*

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What are the CPT codes?

- CPT code 98980: 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; first 20 minutes — base code.
- CPT code 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 add on code 20 minutes (list separately in addition to code for primary procedure).
- CPT code 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.
- CPT code 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.
- CPT code 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. (Specific to ARIA Physical Therapy device.)

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KEY Coding Rules

- Cumulative time spent for data review and patient/caregiver interaction is totaled for a calendar month (not each 30 days).
- The base code (98980) and add-on code (98981) are reported together on the claim based on total time following the end of the calendar month.
- We do not report these codes if activities total less than 20 minutes in a calendar month.
- Codes 98980, 98981 require at least **one interactive communication** with the patient or caregiver. The interactive communication contributes to the total time, but it does not need to represent the entire cumulative reported time of the treatment management service.
- Codes 98976 and 98977 represent the cost of supplies for specific types of monitoring systems.

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RTM versus RPM

- These codes have been created to be analogous to **remote physiologic monitoring codes** 99453, 99454, 99457, and 99458.
- Although, the main distinction between these code families is the data parameters that are being reviewed.
- The current remote physiologic codes are used to monitor physiologic parameters (eg, weight, blood pressure, pulse oximetry, respiratory flow rate, etc).
- The remote therapeutic monitoring codes (98975-98981) are used to monitor system status and response to prescribed home/self-management programs (eg, musculoskeletal system status, respiratory system status, therapy adherence, therapy response) representing the review and monitoring of data related to physical and functional performance, signs, symptoms, and functions of a therapeutic response.

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CMS Final Thoughts

- Our decision to finalize the proposed RTM codes and our proposed valuations for the services strikes a balance between supporting beneficiary access to care that these services describe and allowing for non-E/M billing practitioners to furnish and bill for these services.”
- Moreover, they allow opportunity for engagement and further conversation, noting, “We acknowledge the major themes that emerged in the comments from stakeholders about broadening the base of practitioners that could furnish the RTM and RPM services, as well as maximizing the efficiency with which these services could be furnished.”

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When Is It Appropriate to Use RTM Codes?

- Jessica Zeff, Director of Product Compliance at Net Health

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Case Study

- *An asthmatic patient is prescribed a rescue inhaler equipped with an FDA-approved medical device that monitors when the patient uses the inhaler, how many times during the day the patient uses the inhaler, how many puffs/doses the patient uses each time, and the pollen count and environmental factors that exist in the patient's location at that time.*
- *This is non-physiologic data. The data is then used by the treating practitioner to assess the patient's therapeutic response and adherence to the asthma treatment plan. This can enable the practitioner to better determine how well the patient is responding to the particular medication, what social or environmental factors affect the patient's respiratory system status, and what changes could be made to improve the patient's health.*

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Case Study

- A 65-year-old male presents to the physician's or other QHP's office with exacerbation of a chronic condition. Following the visit, the physician initiates a remote therapeutic monitoring program to enable data collection and monitoring to support the therapeutic management of his condition.

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Case Study

- Clinical staff walks the patient through the set-up of the therapeutic monitoring technology. Educate the patient regarding how to use the technology and related daily tasks. For respiratory therapy monitoring, introduce the patient to the device and the mobile app. For musculoskeletal therapy monitoring, educate the patient on setting up the device, reviewing the 3D motion capture technology, and reviewing the specific exercises as prescribed by the physician or other QHP. Give the patient the opportunity to ask questions.

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Case Study

- A 66-year-old female, who has limited mobility caused by osteoarthritis of her knees, is enrolled in a remote therapeutic monitoring program to enable data collection and monitoring to support the therapeutic management of her musculoskeletal condition

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How often can you bill for RTM Codes?

- Jessica Zeff, Director of Product Compliance at Net Health

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Remote Therapeutic Monitoring (RTM)

- **Cumulative** time spent for data review and patient/caregiver interaction is totaled for a **calendar month** (not each 30 days).
 - The base code (**98980**) and add-on code (**98981**) are reported together on the claim based on total time following the end of the calendar month.
 - Do not report these codes if activities total less than 20 minutes in a calendar month.
 - Time related to any other services—such as an evaluation or a therapy treatment session—must not be included in these codes

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FDA Requirements

- Raz Evenor, VP of Business Development, Owlytics Healthcare

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Documentation Requirements

Remote Therapeutic Monitoring Codes

- **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**.
 - **Documentation:** Document the type of device being used, the specific education and training provided to the patient and/or caregiver, and any device set-up required. Additionally, include documentation that demonstrates that at least 16 days of data transmission occurred over a 30-day period.
- **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 to Use:** Report this code only if monitoring occurs over a period of at least 16 days.
 - **Documentation:** Document the name and description of the device provided for monitoring of the respiratory system. Additionally, include documentation that demonstrates that at least 16 days of data transmission occurred over a 30-day period.
- **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 to Use:** Report this code only if monitoring occurs over a period of at least 16 days.
 - **Documentation:** Document the name and description of the device provided for monitoring of the respiratory system. Additionally, include documentation that demonstrates that at least 16 days of data transmission occurred over a 30-day period.

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Documentation Requirements

Remote Therapeutic Treatment Codes

- **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
 - **When to Use:** Use to report the first 20-minute increment of time spent reviewing and integrating the data collected during remote monitoring to inform treatment goals; monitor the patient's progress and adherence to the treatment plan; and provide clinical feedback to the patient/caregiver.
 - **Documentation:** Document the data gathered from the device, the date and time of the patient and/or caregiver interaction, and any decisions made that impact the treatment and plan of care as a result of the monitoring. Additionally detail the how the 20-minutes of time accumulated in reviewing and integrating data into care.
- **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).
 - **Use to** report each subsequent 20-minute increment of time spent reviewing and integrating the data collected during remote monitoring to inform treatment goals; monitor the patient's progress and adherence to the treatment
 - **Documentation:** Document the data gathered from the device, the date and time of the patient and/or caregiver interaction, and any decisions made that impact the treatment and plan of care as a result of the monitoring. Additionally detail the how the 20-minutes of time accumulated in reviewing and integrating data into care.

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Billing For the RTM Codes

- Raz Evenor, VP of Business Development, Owlytics Healthcare

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Vendor Solutions

- **Medbridge**
 - Joe Brence
 - 724-699-1874
 - Joseph.Brence@medbridgeed.com
 - www.medbridgeeducation.com
- **Net Health**
 - Jessica Zeff
 - 412-235-4240
 - Jessica.Zeff@nethealth.com
 - www.nethealth.com
- **Owlytics**
 - Raz Evenor
 - M 1-617-447-3553
 - raz@owlytics.com
 - www.owlytics.com

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MEDBRIDGE

Remote Therapeutic Monitoring Design

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Improve Outcomes at a Lower Cost with MedBridge

Best-in-class provider education, patient management, reporting, and analytics

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years in business

250,000+

subscribers

20 million+

patients impacted

Highest Quality Content

All-in-One Solution

Your Care Partner

• Designed specifically for private practices

• Evidence-based education from expert instructors

• Optimized to drive learning and behavior change for patients and providers

• A single, powerful solution that addresses challenges from both patient and provider perspectives

• Reduces need for multiple vendors and integrates with your EHR and HR systems

• 100% client retention

• Consultative approach

• Dedicated implementation and account management team

ATHLETICO

PHYSICAL THERAPY

Drayer

PHYSICAL THERAPY INSTITUTE

MOTION

PIVOT

PHYSICAL THERAPY

Therapeutic Associates

PHYSICAL THERAPY

results

PHYSIOTHERAPY

Get better, faster


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OUTCOMES

PATIENT ENGAGEMENT

STAFF RETENTION

Retain patients and increase revenue by driving patient engagement and satisfaction.



Patient Engagement Solution

captures \$3.04M by reducing self-discharges and no-shows

Based on 100 Clinical FTE

How we do it:

○ Create condition-focused templates

○ Assign program to targeted patients

○ Progress the program & monitor adherence

○ Check in anytime, anywhere

The results we've seen:

• Elevate quality of care

• Create a consistent brand experience

• Track and improve patient satisfaction

• Improve access to care

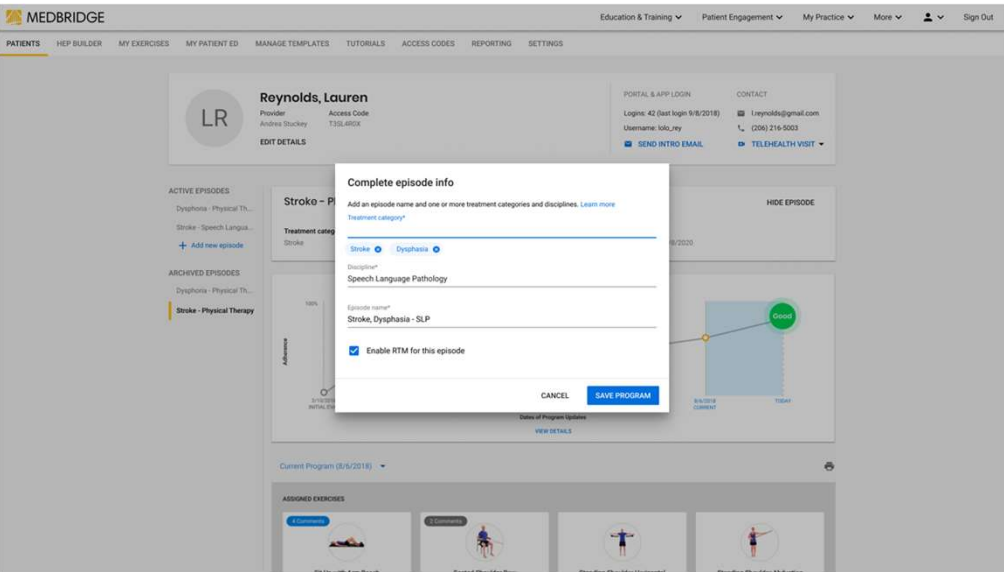
Use MedBridge for Remote Therapeutic Monitoring. Ask us how.

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Step 1: Patient identified as RTM eligible and appropriate

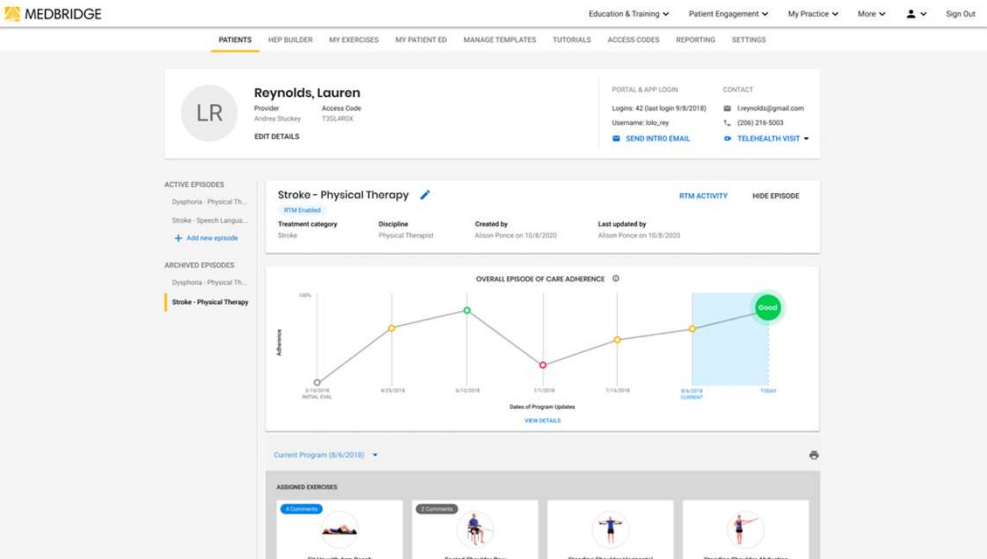


Episode created and RTM enabled

Cannot be disabled after 1 week

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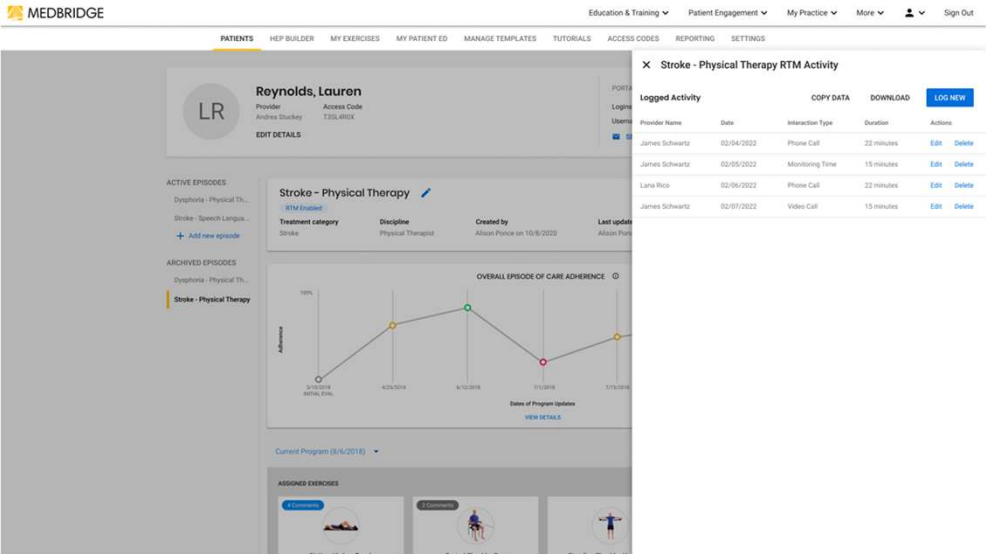
Step 2: Clinician Logs Review of Adherence in MB Activity Log



Clinician reviews adherence and logs time in MedBridge

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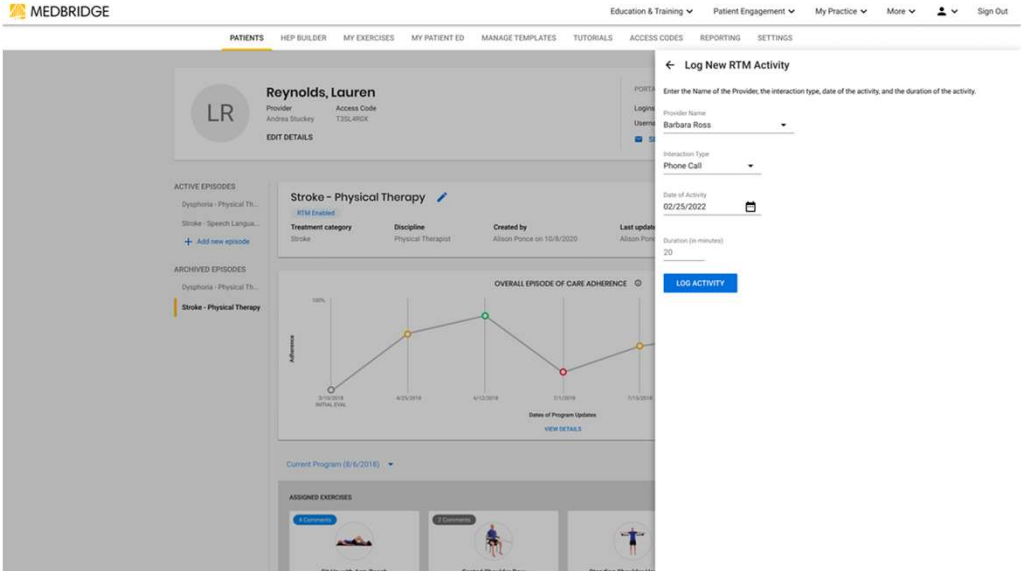
Step 2: Clinician Logs Review of Adherence in MB Activity Log



Clinician reviews adherence and logs time in MedBridge

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Step 2: Clinician Logs Review of Adherence in MB Activity Log



Able to choose from remote communication options

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Clinician
can
download
PDF or
copy the
data to the
EMR

Step 4: Review RTM Documentation - PDF

Per patient
documentation of
activity

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Remote Therapeutic Monitoring Document

Patient: Jane Doe
Date of Birth: 01/01/1956
Episode Name: Shoulder - PT

RTM Tracking Started: 03/01/2022
Primary Clinician: John Smith

Clinical Monitoring Log

- 3/01/2022 - John Smith, PT, created home exercise program
- 3/01/2022 - John Smith, PT, home exercise program shared via text
- 3/01/2022 - John Smith, PT, recorded patient interaction. Type: Onboarded Patient. Duration: 5 minutes
- 3/02/2022 - John Smith, PT, recorded patient interaction. Type: Phone Call. Duration: 5 minutes
- 3/07/2022 - John Smith, PT, recorded patient interaction. Type: Monitoring Time. Duration: 10 minutes
- 3/07/2022 - John Smith, PT, updated home exercise program.
- 3/07/2022 - John Smith, PT, recorded patient interaction. Type: Video Call. Duration: 15 minutes

Patient Monitoring Log

- 3/1/2022 - Jane Doe logged into portal
- 3/2/2022 - Jane Doe logged exercise session
- 3/2/2022 - Jane Doe viewed educational resources
- 3/2/2022 - Jane Doe logged into portal
- 3/3/2022 - Jane Doe logged exercise session
- 3/4/2022 - Jane Doe logged into portal
- 3/4/2022 - Jane Doe logged exercise session
- 3/5/2022 - Jane Doe logged into portal
- 3/5/2022 - Jane Doe logged exercise session
- 3/6/2022 - Jane Doe logged into portal
- 3/6/2022 - Jane Doe logged exercise session
- 3/7/2022 - Jane Doe logged into portal
- 3/7/2022 - Jane Doe logged exercise session
- 3/7/2022 - Jane Doe messaged their clinician
- 3/8/2022 - No activity recorded
- 3/9/2022 - No activity recorded
- 3/10/2022 - Jane Doe logged into portal

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Net Health At A Glance


Reuniting caregivers
with their calling®

EHR SOFTWARE

Harnessing data
for human health

ANALYTICS

- Tailored solutions for specialized healthcare markets including **physical, occupational and speech therapy, wound care, occupational medicine** and **home health and hospice**
- **Comprehensive EHR systems and advanced analytics** delivering actionable clinical and operational insights based on proprietary data sets
- Blue-chip customer base of **over 23,000 facilities across the continuum of care including 90% of the largest hospital systems**, virtually all skilled nursing facilities and leading outpatient therapy clinics and home health and hospice agencies
- Robust **roadmap for organic growth** through cross/upsell, new products and adjacent markets; inorganic growth strategy supported by strong **track record of successful M&A and integration**


 Net Health

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Owlytics Healthcare



Machine Learning and Leading Wearable Brands



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Owlytics Healthcare

- Personalized Care
- Fall Risk Assessment
- Data Driven Care





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Attendee Q&A