SECTION 5: BILLING AND REIMBURSEMENT GUIDELINES

of the Professional Provider Office Manual

5.42 DIGITAL HEALTH

This is a subsection of Section 5: Billing and Reimbursement Guidelines of the *Professional Provider Office Manual*. If Blue Cross and Blue Shield of Louisiana (Louisiana Blue) makes any procedural changes, in our ongoing efforts to improve our service to you, we will update the information in this subsection and notify our network providers. For complete *Professional Provider Office Manual* information, please refer to the other sections of this manual. Contact information for all manual sections is available in the Manual Reference Section.

For member eligibility, benefits or claims status information, we encourage you to use iLinkBlue (www.lablue.com/ilinkblue), our online self-service provider tool. Additional provider resources are available on our Provider page at www.lablue.com/providers.

This manual is provided for informational purposes only and is an extension of your Professional Provider Agreement. You should always directly verify member benefits prior to performing services. Every effort has been made to print accurate, current information. Errors or omissions, if any, are inadvertent. The Member Contract/Certificate contains information on benefits, limitations and exclusions, and managed care benefit requirements. It also may limit the number of days, visits or dollar amounts to be reimbursed.

As stated in your agreement: This manual is intended to set forth in detail our policies. Louisiana Blue retains the right to add to, delete from and otherwise modify the *Professional Provider Office Manual* as needed. This manual and other information and materials provided are proprietary and confidential and may constitute trade secrets.

REMOTE PATIENT MANAGEMENT SERVICES

Remote patient management involves the collection and analysis of patient physiologic data that is used to develop and manage a treatment plan related to a chronic or acute health illness or condition. Providers should adhere to the billing guidelines below for remote patient management services.

Provider Requirements

Reimbursement for remote patient management is only available for established patients. Services can be ordered by medical doctors, doctors of osteopathic medicine, nurse practitioners or physician assistants.

Services must be provided by an in-network provider, qualified healthcare professional or plan contracted resource. Provider types performing remote patient management services must ensure the delivery of services is within their respective scope and guidance of their relevant licensing and/or certifying boards.

Remote patient management is a provider service. Services are not considered to be diagnostic tests. They cannot be furnished and billed by an independent diagnostic testing facility on the order of the provider.

Patient Consent

A patient must consent to remote patient management prior to or at the time services are furnished. The consent can be obtained by individuals under contract with the billing provider.

Remote Patient Monitoring Devices

A remote patient monitoring device must meet the U.S. Food and Drug Administration's (FDA) definition of a medical device. The device must be digitally capable of uploading patient physiologic data to the care team in real time.

- Data cannot be self-recorded or self-reported by the patient.
- Use of a device to digitally collect and transmit a patient's physiologic data must be reasonable and necessary for the diagnosis or treatment of the patient's illness or injury or to improve the functioning of a malformed body member.
- Device must be used to collect and transmit reliable and valid physiologic data that allow understanding of the patient's current health status to develop and manage a plan of treatment.
- Devices and programs should be applicable to all federal, state and local mandates for privacy and safety.

The following criteria apply for remote patient monitoring device billing:

- The device must be supplied by the ordering provider or contracted durable medical equipment (DME) provider.
- The provider can only bill for the device (99454) when they supply it.

- Two different providers are not allowed to bill for the same service and diagnosis, during the same time period.
- Only FDA-approved remote patient monitoring devices shall be considered acceptable.
- Smart watches, Fitbits and other fitness trackers, as well as similar multifunction monitoring (non-medical) devices that are FDA-approved for a metric are not considered acceptable.

Monitoring and Reporting Duration

A remote patient monitoring device must monitor and report on at least 16 days of a 30-day period to bill for services. Reporting of data to the provider must be automatic (not dependent upon patient manually uploading data).

Coding and Billing

The following codes are reimbursable for remote patient management and remote patient monitoring devices.

CPT Code	Limitations
99453	Once per lifetime
99454	Once per month
99457	Once per month
99458	Three diagnoses per month