



Remote Patient Monitoring Criteria

Policy Number: PA 23

Last Review Date: 08/07/2025

Effective Date: 01/01/2018

Policy

Maryland Care, Inc., dba Maryland Physicians Care (MPC) considers Remote Patient Monitoring medically necessary for the following indications:

Maryland Physicians Care members are eligible to receive RPM services if:

1. The member is enrolled with MPC on the date the service is rendered.
2. The member consents to remote patient monitoring services and has the capability to utilize the monitoring tools and take actions to improve self-management of the chronic disease.
3. The member has the internet connections necessary to host the equipment in the home.
4. The member is at risk for avoidable hospital utilization due to poorly controlled:
 - Hypertension (HTN)
 - Chronic obstructive pulmonary disease (COPD)
 - Asthma
 - Congestive heart failure (CHF)
 - Diabetes type 1; or (DM1)
 - Diabetes type 2; and (DM2)
5. The provision of remote patient monitoring may reduce the risk of preventable hospital utilization and promote improvement in control of the chronic condition.

Maryland Physicians Care Prior Authorization Department reviews requests for RPM utilizing the following criteria :

(COPD, Asthma, CHF, DM 1&2)

1. The Member has one of the conditions described above and meets the following:
 - a. Two (2) hospital admissions within the prior 12 months with the same qualifying medical condition as the primary diagnosis
 - b. Two (2) emergency department visits within the prior 12 months with the same qualifying medical condition as the primary diagnosis, or
 - c. One (1) hospital admission and one separate emergency department visit within the prior 12 months with the same qualifying condition as the primary diagnosis.
2. The look back period is from the date requested over the previous 12 months for qualifying scenarios.
3. The provider must submit the request utilizing the MPC RPM preauthorization form which can be found on our website at [Provider Forms - Maryland Physicians Care](#)



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OR

(HTN)

1. The Member has the Diagnosis of Hypertension
2. The Member is using a self-measured blood pressure device validated for clinical accuracy.
3. Readings to be obtained twice a day over a 30-day period (minimum of 12 readings) with collection of data to be reported by the patient/caregiver to the physician or other qualified health professional.
4. Clear Treatment Plan is provided to the members with the reported readings
5. The provider must submit the request utilizing the MPC RPM preauthorization form which can be found on our website at Provider Forms - Maryland Physicians Care

Covered Services include:

- A. Remote patient monitoring services include:
 - (1) Installation;
 - (2) Education for the participant in the use of the equipment; and
 - (3) Daily monitoring of vital signs and other medical statistics.
- B. The remote patient monitoring provider shall establish an intervention process to address abnormal data measurements to prevent avoidable hospital utilization.
- C. Physician, nurse practitioner, and physician assistant providers who establish remote patient monitoring programs shall be responsible for:
 - (1) Establishing criteria for reporting abnormal measurements;
 - (2) Informing the members of abnormal results; and
 - (3) Monitoring results and improvements in patient's ability to manage chronic conditions.
- D. Medical interventions by a physician, nurse practitioner, or physician assistant based on abnormal results shall be reimbursed according to COMAR 10.09.02.07.
- E. A home health agency shall:
 - (1) Have an order from a physician who has examined the patient and with whom the patient has an established, documented and ongoing relationship;
 - (2) Report abnormal measurements to the participant and to the ordering provider; and
 - (3) Send the ordering provider a weekly summary of monitoring results, including improvement in patient's ability to self-manage chronic conditions.
 - (4) Home health agencies may only be reimbursed for RPM when the service is ordered by a physician.



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The Maryland Physicians Care Remote Patient monitoring Prior Authorization form is required for all requests.

Limitations

- A. Remote patient monitoring services are only covered for members who meet the eligibility criteria specified above
- B. The Program **does not** cover:
 - (1) Remote patient monitoring or SMBP equipment;
 - (2) Upgrades to remote patient monitoring or SMBP equipment;
 - (3) The internet connections necessary to transmit the results of remote patient monitoring or SMBP services to the provider's offices; or
 - (4) More than (**Max number of requests**):
 - (a) 60 days of remote patient monitoring services per episode; and
 - (b) Two episodes per year per participant on a rolling 12-month cycle.
- a. (c) One unit of SMBP in a given 30-day period.

Background

Remote patient monitoring 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. Remote patient monitoring is recommended when it can reduce the risk of preventable hospital utilization including readmissions and emergency department visits and to improve quality of care.

Definition -Remote patient monitoring" means the use of synchronous or asynchronous digital technologies that collect or monitor medical, patient-reported, and other forms of health care data for Program participants at an originating site and electronically transmit that data to a distant site provider to enable the distant site provider to assess, diagnose, consult, treat, educate, provide care management, suggest self-management, or make recommendations regarding the Program participant's health care.

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Codes

Code	Description
0581 (Revenue)	Home Health Agencies
99453	Remote monitoring of physiologic parameters (weight, BP, Pulse Os, respiratory flow rate), initial set-up and patient education on use of equipment- Once per device
99454	Device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days
99457	First 20 minutes of physician's interpretation and interactive communication with the patient/caregiver every month.
99458	Subsequent 20 minutes of physician's interpretation and interactive communication with patient/caregiver every month.
99473	Self-measured blood pressure using a device validated for clinical accuracy; patient education/training and device calibration. (not to be billed with 99453)
99474	Self-measured blood pressure using a device validated for clinical accuracy; separate self-measurements of two readings one minute apart, twice daily over a 30-day period (minimum of 12 readings), collection of data reported by the patient and/or caregiver to the physician or other qualified health care professional, with report of average systolic and diastolic pressures and subsequent communication of a treatment plan to the patient. (not to be billed in same 30-day period as 93784, 93786, 93790, 99453, 99454, 99091, 99457, 99487, 99489-99491)

20 minutes includes both synchronous, real-time interactions as well as non-face-to-face care management services.

References

COMAR 10.09.96.01-13

COMAR 10.67.06.26-5



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Attachment

RPM Prior Authorization Form



MPC Remote Patient
Monitoring PA Form-

Revision Log

Reviewed and Revised: Updated template and COMAR reference	February 2021
Annual Review	February 2022
Annual Review no changes	February 2023
Reviewed and revised: Added Asthma as a qualifying condition; updated link to MPC RPM form; renamed form from MDH to MPC form; added that HHA must have a physician order to receive reimbursement; updated background; added a definition of RPM; added a description to the codes; updated COMAR regulations; added new MPC RPM PA form.	August 2024
Annual review, no revisions necessary	February 2025
Revised: Added HTN, removed the paragraph regarding SMBP; updated the MPC RPM preauthorization form, and updated codes.	August 2025