



NARA
The National Association of
Rehabilitation Providers and Agencies

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Remote Therapeutic Monitoring: Is it Right For Your Organization?

Panelists:

- **Lisa Chambers, Blue Sky Therapy - Enhance Therapies**
- **Kevin Christensen, Intermountain Healthcare**
- **Jennifer Lucas, Powerback Rehabilitation**

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Housekeeping Reminders

- All attendees are on mute
- If there are handouts a link was provided in the reminder email for this webinar
- **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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Disclaimer

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), commercial payers, state and national associations, and continue to watch for new developments and information regarding the topics discussed today.



Remote Therapeutic Monitoring: “The What”

Remote Therapeutic Monitoring CPT Code Description***

Set-up and Education (all eligible/FDA approved devices; is not system, condition, or therapeutic response-specific.)	
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.
Supply of Device (specific to device costs for monitoring respiratory and/or musculoskeletal systems)	
98976	Remote therapeutic monitoring device(s) supply with scheduled (e.g., daily) recording(s) and/or programmed alert(s) transmission to monitor respiratory system, each 30 days.
98977	Remote therapeutic monitoring device(s) supply with scheduled (e.g., daily) recording(s) and/or programmed alert(s) transmission to monitor musculoskeletal system, each 30 days.
Monitoring/Care Management (may be reported for the monitoring of any system or therapeutic response.)	
98980*	Remote therapeutic monitoring treatment management, 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.
98981*	Remote therapeutic monitoring treatment management, physician/other qualified healthcare professional time in a calendar month, each additional 20 minutes.

*subject to the de minimis policy (reduced payment for services provided by PTA/OTA); not subject to the 8-Minute Rule.

**Interactive communication must be real-time, i.e. phone or video interaction. Text and/or email interaction do not meet this requirement.

***codes must be included in the plan of care

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Intermountain's RTM Vendor Search Journey



General Example- Define & Organize the Problem(s)

Identify & Define Problem

- What is the problem
- Who's Involved
- Where is it happening
- Why is it happening

Organize a Team

- Those who need/use it
- Managers/Leadership
- IT/Cyber
- Legal
- Patients?

Define Success/Failure

- What would success look like
- What would failure look like
- What would get in the way of success

None of this work involves a vendor or a product- **DON'T FIND A PROBLEM TO FIT A VENDOR**



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Intermountain's RTM Vendor Search Journey



Intermountain Example- Define & Organize the Problem(s)

Identify & Define Problem

- Standardize & improve patient data collection & triage patients needs
- Effective HEP & intervention platform
- Improve patient retention and interdisciplinary care
- Early access to Rehab.

Organize a Team

- Rehab/Therapy
- MSK/Surgical Services
- Community Health
- Leadership
- DTS (Cyber & IT)

Define Success/Failure

- Improved patient outcomes
- One platform that could meet most needs
- RTM & computer vision
- Seamless EMR integration & eases documentation burden



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Now you are ready to start your RTM Journey!



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Intermountain's RTM Vendor Search Journey

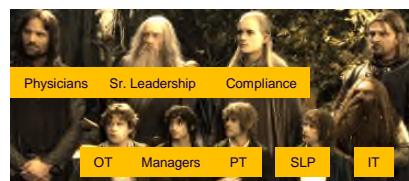
Identify Appropriate Solutions & Actions

What Exists to Solve The Problem

1. Market analysis → **Eighteen** vendors operating w/RTM
2. RFI → Microsoft Forms → which vendor/products meet our needs
3. Top **six** moved onto our RFP/ presentations. Standard grading form to grade presentations.
4. Top **two** vendors present on an identified pilot (OP Falls). Winner will be rewarded with pilot.

What Is Needed to Implement


- A problem to solve & unite the team
- Engagement, participation, & collaboration
- Leaderships buy-in & funding
- Appropriate technology & infrastructure to support the solution
 - e.g., EMR integration




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82 Question Survey
10 Sections




Digital Patient Engagement
Vendor Information Collection
Form

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Vendor	Critical Score	Non Critical Score	Total Score
Vendor #1	26	27	53
Vendor #2	26	27	53
Vendor #3	26	24	50
Vendor #4	27	20	47
Vendor #5	23	23	46
Vendor #6	23	23	46
Vendor #7	28	17	45
Vendor #8	25	20	45
Vendor #9	21	22	43
Vendor #10	23	18	41
Vendor #11	22	19	41
Vendor #12	20	19	39
Vendor #13	20	19	39
Vendor #14	21	15	36
Vendor #15	17	19	36
Vendor #16	19	16	35
Vendor #17	16	18	34
Vendor #18	17	9	26

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22 Question Survey
9 Sections



[VENDOR X]- Digital Health
Vendor Presentation Score Card
9.29.23

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Vendor	Data	Interventions	Track Patient Over Time	Retention, Referral, Access	Integration	Total Score
Vendor #1	7.42	3.83	4.25	3.33	3.50	22.33
Vendor #2	3.00	3.50	1.70	2.70	3.00	17.90
Vendor #3	5.27	1.00	3.45	2.55	0.45	12.73
Vendor #4	4.00	0.89	-0.44	1.89	4.67	11.00
Vendor #5	2.90	2.10	3.50	2.10	0.30	10.90
Vendor #6	5.00	1.00	3.50	1.83	-0.67	10.67

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22 Question Survey
9 Sections

[VENDOR X] - Final Presentation
Score Card 3/25/24



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Coming soon, but not today



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Implementing Technology Across Post Acute Settings

CONSIDERATIONS:

1. Identifying a tool that would provide objective and valuable clinical information + RTM capabilities
2. Ease of use for the therapists and patients
3. Type and application of the data
4. Support for utilization in different clinical settings
5. Return on Investment

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IMPLEMENTATION AND TRAINING



IMPLEMENTATION

- Identify SNF Sites to Pilot
 - Staffing
 - Patient Census
 - Responsiveness of Team and Ability to Identify a Champion
- Identify Home Health Therapists to Pilot
- Identify In-Home Therapists to Pilot
 - Billing Department is responsive and has the knowledge to bill RTM codes
 - Software can support RTM billing
- Develop an Implementation Timeline for Each Setting
 - Initiated in SNF, then Home Health and lastly Direct Bill / In Home setting
 - Set expectations during implementation

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IMPLEMENTATION AND TRAINING



Key Training Considerations

- Each site received on site training with follow up remote training on set up and use of application
 - Champion identified to monitor utilization and trouble shoot
 - Partner with a technology provider that provides ongoing support
- Weekly/Monthly champion calls are held for troubleshooting and application updates
 - Identification of barriers and resolution is critical aspect of these calls
- Setting expectations for utilization through metrics during training process
 - Weekly review of metrics with team and/or champion by DOR/RDO
- Specialized training for RTM and compliance with billing requirements
 - Provide training guides/cheat sheets for reference

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KEY FACTORS FOR SUCCESS



- PROVIDER & COST**
 - Pricing: per site/per patient/RTM
 - Sustainable
 - Flexible
 - Provider Culture
 - Support
 - Aligned
 - Responsive to Feedback
- STAFF**
 - Successful Engagement
 - Provide a Voice
 - Reward Adoption
 - Highlight Successes
 - Continued Support
 - Consistent Utilization of Data
 - Promote Top of Mind
 - Responsiveness to Change
 - Technology Oriented
 - See the Vision
- ROI CONSIDERATIONS**
 - Objective Data Collected
 - LOS Impact
 - LTC Services Provided
 - Decreased Re-admission to Hospital
 - RTM Revenue – ability to bill all 4 codes
 - Support for Additional Tx Visits
 - Continuity of Transitions of Care
 - Patient Satisfaction
- INNOVATION**
 - Industry Leaders
 - Differentiator
 - Company Support

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Remote Therapeutic Monitoring: “The Why”

- Improved patient outcomes
- Increased efficiency
- Cost reduction
- Expanded access to care
- Transformation of care delivery



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Remote Therapeutic Monitoring: “The How”

- Interprofessional team of clinical leaders, regulatory and reimbursement experts, and operational leaders formed to research feasibility
- 3-Part Curriculum development
 - RTM Overview
 - Coding and Billing Basics
 - Application Via Case-Based Approach
- Integration of Patient Engagement Platform for monitoring of HEP
- Implementation of Staff Training
- First patients enrolled in July 2022

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Clinical and Operational Impact

- Enhanced Patient Engagement
- Personalized Care Plans
- Early Intervention to mitigate challenges
- Additional revenue stream for actively engaged patients

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Access to Care Impact

- National Staffing Crisis
- Reduction in workforce since the COVID PHE
- Fewer therapists available in rural settings
- Limitations in commercial/ managed care visits
- High co-pays limit affordable access to care

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Overcoming Challenges

- Appropriate HEP prescription
- Patient engagement with HEP
- Access to technology
- Comfort with technology
- Coding/Billing Complexities

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Practical Strategies for Success

- HEP implementation
- Resources for technology
- Adoption of technology
 - Clinician
 - Patient

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