

# Remote patient monitoring use ascends, but most clinicians still aren't adopters

Article

**The trend:** Healthcare providers are filing more claims than ever before to get reimbursed for conducting [remote patient monitoring \(RPM\) services](#), according to a recent report from

Definitive Healthcare, a healthcare commercial intelligence company. That's driven RPM adoption among clinicians, but several barriers are impeding further uptake.

**How we got here:** The Centers for Medicare & Medicaid Services (CMS) began reimbursing physicians in 2018 for performing RPM services.

- CMS developed a single CPT (Current Procedural Terminology) code for remote monitoring in 2018 that allowed clinicians to get reimbursed for **collecting and analyzing digital data from an RPM device**.
- **Several billable codes have since been added** to expand the list of RPM services providers could get reimbursed for. These include helping patients **set up the RPM tool and training them on how to use it; receiving daily alerts; and reviewing device-generated data**.

**Digging into the data:** Researchers analyzed claims data for RPM services conducted across 10 CPT codes between 2019-2022.

They found that RPM claims filed by physicians have significantly grown since 2019, particularly for certain specialties and conditions.

- Claims volumes for 10 CMS codes for **remote monitoring grew 1,294% from January 2019 to November 2022**.
- By November 2022, **RPM claims volumes were already 27% higher** than they were through all of 2021.
- Clinicians in **internal medicine (26%), cardiology (18%), and family practice (18%)** had the highest share of remotely monitored patients in 2021.
- Conditions related to **hypertension and diabetes made up nearly three-quarters (73%)** of RPM-submitted claims in 2021.

**Yes, but:** Only 25% of healthcare leaders say their practices currently use RPM, per a June 2022 MGMA Stat poll.

Higher rates of adoption are being hampered by challenges such as **data security and quality, inconsistent reimbursement policies, and technology barriers**, per Definitive researchers.

- For example, a Wi-Fi-enabled blood pressure cuff could be stolen or hacked, resulting in inaccurate readings.

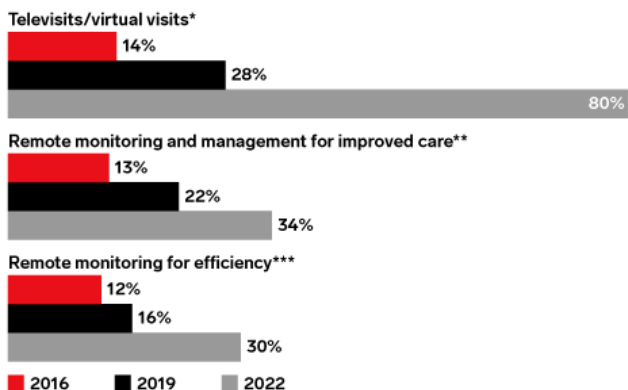
- Insurers' [reimbursement rules](#) vary, and in some cases low payments and stringent requirements for billable services could dissuade physicians from adopting RPM.
- Some providers may not have the tech infrastructure needed to support continuous remote monitoring.
- And certain patients—such as those in rural areas—don't have access to high-speed internet.

**Our take:** [Clinicians' RPM adoption](#) has nearly tripled since 2016. Diabetes and heart disease —two of the most severe and costliest chronic conditions to manage—are naturally the two highest use cases for RPM since they require frequent check-ins from primary care physicians and specialists.

**Despite this growth, around three-quarters of providers still aren't using RPM today.** Simplifying the technology aspects for providers and patients—and appropriately reimbursing physicians—will be necessary for further RPM uptake.

### Select Digital Tools US Physicians Incorporate Into Their Practice, 2016, 2019, & 2022

% of respondents



Note: n=1,300; \*an audio/video connection used to see patients remotely such as simple acute illness, adjusting therapy, etc.; \*\*apps and devices for use by chronic disease patients for daily measurement of vital signs such as weight, blood pressure, blood glucose, etc.; readings are visible to patients and transmitted to the physician's office; alerts are generated as appropriate for missing or out of range readings; \*\*\*smart version of common clinical devices such as thermometers, blood pressure cuffs, and scales that automatically record the reading in the patient record

Source: American Medical Association (AMA), "AMA Digital Health Research," Sep 28, 2022  
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