

Remote Physiologic Monitoring 2023 Medicare Physician Fee Schedule¹

CPT code	Description	Non-facility rate	Facility rate
99453	Initial set up Covers initial set up and education on the use of equipment	\$19.32	\$19.32
99454	Data transmission² Remote monitoring of physiologic parameters ³	\$50.15	\$50.15
99091	Collection and interpretation Data digitally transmitted by patient/caregiver for HCP review (minimum of 30 minutes, each 30 days)	\$54.22	\$54.22
99457	Treatment management Includes interactive communication between patient/caregiver and clinical staff (initial 20 minutes)	\$48.80	\$30.16
99458	Treatment management⁴ Includes interactive communication between patient/caregiver and clinical staff (additional 20 minutes)	\$39.65	\$30.16

First month		Monthly		
Initial set up fee 99453 \$19.32	+	Data transmission fee 99454 \$50.15	Collection and interpretation fee (30 min) 99091 \$54.22	Treatment management fee (initial 20 min) 99457 \$48.80
				Treatment management fee (additional 20 min) 99458 \$39.65
Total monthly reimbursement: ~\$212.14				

1. Provided for educational purposes only. Fees are based on the RVU (relative value unit) calculation results based on the values supplied by the Centers for Medicare & Medicaid in the 2023 national Physician Fee Schedule relative value file. Accessed January, 26, 2023. <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-Value-Files>. For use of Philips products and services, based on CMS codes for a one-time set up fee, recurring 30-day utilization and transmission, plus 20 minutes twice per month of additional health data monitoring over a period of one year. CMS Reimbursement National Average; see CMS guidelines for state reimbursement rates at [cms.gov](https://www.cms.gov). This is not intended to provide healthcare advice. Medical necessity and accurate coding is a healthcare provider responsibility. Not predictive of revenue results. Results may vary. 2. According to CMS, code 99454 can only be billed once per patient per 30-day period even if the patient receives multiple devices. 3. According to CMS, code 99454 monitoring of at least 16 days per 30-day period is required. 4. According to CMS, there is no limit on the number of minutes billed per patient per month for code 99458. References: A) Centers for Medicare & Medicaid Services. Physician Fee Schedule. Accessed December 19, 2022. <https://www.cms.gov/medicare/medicare-fee-service-payment/physicianfeeschedpfs-relative-value-files/rvu23a>. B) Centers for Medicare & Medicaid Services. Addendum B. CY 2023 PFS Final Rule Addenda (ZIP). Accessed December 19, 2022. <https://www.cms.gov/files/zip/cy-2023-pfs-final-rule-addenda.zip>.