



REMOTE PATIENT MONITORING

Physician's Guide to **RPM Revenue &** CMS Reimbursements

How physicians, clinics, and hospitals are adding \$150,000–
\$500,000+ in annual revenue through Remote Patient
Monitoring — without disrupting clinical operations

\$180

Per patient/month avg

4 CPT

Billable RPM codes

100+

Eligible conditions

Table of Contents

1	What Is Remote Patient Monitoring? The clinical and financial case for RPM in 2026	3
2	The 4 CMS RPM Billing Codes CPT 99453, 99454, 99457, 99458 — explained in plain language	4
3	Eligibility & Patient Criteria Which patients qualify and how to identify them	5
4	Revenue Calculator by Practice Size Project your annual RPM income with real CMS rates	6
5	Implementation Roadmap Go from interested to billing in 60–90 days	7
6	Compliance, Documentation & Risk What you must know to stay audit-proof	8
7	Next Steps with RemoteCareToday.com How to get started with a free revenue assessment	9

What Is Remote Patient Monitoring?

Remote Patient Monitoring (RPM) is a CMS-reimbursed clinical service that allows physicians to collect and analyze patient health data — blood pressure, glucose, weight, pulse oximetry, and more — from outside the traditional office setting. CMS first established RPM billing codes in 2019, and reimbursements have grown every year since.



Clinical Benefits

- Earlier detection of deterioration
- Reduced 30-day readmissions
- Better chronic disease outcomes
- Stronger patient engagement
- Fewer unnecessary ER visits



Financial Benefits

- New revenue with existing patients
- Zero new in-person visits required
- Monthly recurring billing
- Reimbursed by Medicare & most PPOs
- Scalable across your entire panel

\$4.4B

CMS RPM spend projected 2026

38M+

Medicare beneficiaries eligible

3–5%

Avg patients enrolled today (huge upside)

60–90

Days to first bill

The 4 CMS RPM Billing Codes

2026 CMS national reimbursement rates (non-facility). Actual rates may vary by geographic adjustment factor.

<p>CPT CODE 99453</p>	<p>Initial Setup & Patient Education</p> <p>One-time code. Covers initial setup of the remote monitoring device and educating the patient on proper use. Billed once per episode of care. Requires physician order.</p>	<p>REIMBURSES ~\$21 one-time</p>
<p>CPT CODE 99454</p>	<p>Device Supply & Data Transmission</p> <p>Monthly recurring. Covers the supply of the FDA-cleared device and transmission of physiologic data. Billed per 30-day period. Patient must transmit data at least 16 days per 30-day period.</p>	<p>REIMBURSES ~\$68 per month</p>
<p>CPT CODE 99457</p>	<p>Monitoring & Management (First 20 min)</p> <p>Monthly recurring. First 20 minutes of clinical staff time reviewing RPM data, communicating with the patient, and documenting. Can be performed by qualified clinical staff under physician supervision. Interactive communication required.</p>	<p>REIMBURSES ~\$54 per month</p>
<p>CPT CODE 99458</p>	<p>Monitoring & Management (Each Add'l 20 min)</p> <p>Monthly recurring add-on to 99457. Each additional 20-minute increment of monitoring time. Can be billed up to 2 additional times per month, per patient (60 minutes max total). Billable by same qualified staff.</p>	<p>REIMBURSES ~\$42 per unit/mo</p>

Total Monthly Potential Per Patient: ~\$122–\$206/month (99454 + 99457 + up to 2× 99458) — before geographic adjustment factors

Patient Eligibility & Target Conditions


RPM is appropriate for Medicare Part B beneficiaries with one or more chronic conditions, as well as many PPO patients. The physician must determine medical necessity and obtain informed consent before enrollment.

✓ Top RPM Conditions

Hypertension	Type 2 Diabetes
CHF / Heart Failure	COPD / Asthma
Post-Surgical Recovery	Obesity (BMI 30+)
CKD / Kidney Disease	Atrial Fibrillation
Sleep Apnea	Depression / Anxiety
Cancer (active tx)	Stroke Recovery

Enrollment Requirements

- 1 Physician Order** — must document medical necessity in the chart
- 2 Informed Consent** — patient must agree to RPM and associated cost-sharing
- 3 FDA-Cleared Device** — must use an approved monitoring device that auto-transmits
- 4 Data Transmission** — patient must transmit ≥ 16 days per 30-day period
- 5 Interactive Communication** — required at least once per 30 days for 99457

 **Key Insight:** The average primary care physician's patient panel has 300–500 chronic disease patients eligible for RPM. With a 20–30% enrollment rate — a conservative target — that's 60–150 patients generating recurring monthly revenue.

Revenue Calculator by Practice Size

Projected annual RPM revenue at conservative enrollment rates using 2026 CMS rates (99454 + 99457 + 1× 99458 monthly)

PRACTICE TYPE	PANEL SIZE	ENROLLED (25%)	MONTHLY REV	ANNUAL REV
Solo Physician	500	125	\$20,500	\$246,000
3-Physician Group	1,500	375	\$61,500	\$738,000
10-Physician Clinic	5,000	1,250	\$205,000	\$2,460,000
Regional Hospital System	20,000+	5,000	\$820,000	\$9,840,000

*Calculations use \$164/patient/month (99454 \$68 + 99457 \$54 + one 99458 \$42). Actual reimbursement depends on geography, payer mix, and patient engagement rates.

THE OPERATOR MODEL

Many practices partner with a specialized RPM operator like RemoteCareToday.com who handles all device fulfillment, patient onboarding, monitoring staff, and billing compliance — so the physician simply orders RPM and collects the reimbursement. **Zero operational overhead. Pure revenue upside.**

Implementation Roadmap

Most practices go from decision to first billing in 60–90 days. With an experienced RPM operator partner handling the logistics, the timeline is even shorter.

1

Assessment & Decision

Week 1–2

Revenue assessment of your patient panel. Identify eligible chronic disease patients. Review compliance requirements. Select RPM operator partner. Leadership buy-in.

2

Contracting & Credentialing

Week 2–4

Business Associate Agreement with RPM operator. Review EHR integration requirements. Staff training on consent and documentation. Payer enrollment if needed.

3

Pilot Enrollment

Week 4–8

Enroll first cohort of 25–50 patients. Devices shipped, patient education complete, consent documented. Initial monitoring cycle begins. Staff workflow integration and troubleshooting.

4

First Billing Cycle

Week 8–12

Submit first month's claims (99454 + 99457/99458). Verify adjudication. Expand enrollment to full target panel. Optimize staff time for billing documentation.

Compliance, Documentation & Risk Management

Documentation Requirements

- Document medical necessity in chart
- Record patient consent (verbal OK, written preferred)
- Log all monitoring time with timestamps
- Document each interactive communication
- Record device readings reviewed per session
- Note clinical decisions made from data
- Maintain 16-day transmission logs for 99454

Common Audit Red Flags

- Billing 99457 without documented interaction
- Missing or unsigned consent forms
- Enrolling patients without chronic conditions
- Using non-FDA-cleared devices
- Billing when <16 days of data transmitted
- Staff not qualified under billing rules
- Double-billing with CCM (99490) same patient same month

The Operator Compliance Advantage

When you partner with a specialized RPM operator like RemoteCareToday.com, compliance is handled for you. The operator maintains all required documentation, ensures device FDA clearance, tracks transmission days, manages consent workflows, and provides billing-ready reports. The practice receives a clean billing file each month — dramatically reducing audit risk.



CHAPTER 7 • NEXT STEPS

Ready to Add \$150K–\$500K+ in Annual Revenue?

We've helped practices of every size implement RPM programs that generate significant recurring revenue — without burdening your clinical staff. Our partner RemoteCareToday.com handles everything: devices, patient onboarding, monitoring staff, billing support, and compliance documentation.



Free Revenue Assessment

We'll analyze your patient panel and project your RPM revenue potential — no obligation.



60-Day Launch Guarantee

From signed agreement to first billing claim in 60 days or we extend your service at no charge.



Zero Clinical Disruption

Our team handles all monitoring, patient outreach, and device support — your staff stays focused on care.



Full Compliance Package

BAA, consent templates, billing documentation, and audit-ready reporting included.

SCHEDULE YOUR FREE RPM REVENUE ASSESSMENT

WEBSITE

www.RemoteCareToday.com

PHONE

503-832-8555

ADVISOR

Legacy Wealth Services

WEBSITE

www.LegacyWealthServices.com

This guide is for informational purposes only. CMS reimbursement rates are subject to annual adjustment and geographic variation. Consult your billing compliance officer before implementing any new billing program. Legacy Wealth Services and RemoteCareToday.com are independent entities.