

## REMOTE PATIENT MONITORING WITH ICARE HOME TONOMETER

1

**QUESTION:** What is the Icare HOME tonometer?

**ANSWER:** The Icare® HOME tonometer is a hand held device that a trained and certified patient can use to safely and reliably measure intraocular pressure (IOP) at home on an occasional basis without local anesthesia. It is FDA cleared<sup>1</sup> and available in the US.<sup>2</sup> Compared with Goldmann applanation tonometry (GAT), the Icare HOME measurements are comparable. The mean difference between Icare HOME and GAT was -0.33 mm Hg (SD 3.11). Most patients (84%) can be certified to use the Icare HOME, but not all, and some patients (6%) have difficulty using the device even after training.<sup>3</sup>

2

**QUESTION:** What is remote patient monitoring (RPM)?

**ANSWER:** For CMS, remote patient monitoring is associated with chronic care management (CCM) of two or more serious conditions expected to last at least a year.<sup>4</sup> Here, the focus is on moderate to severe glaucoma with above-average risk for disease progression with co-existing chronic conditions – either systemic or ophthalmic.

Candidates for RPM using the Icare HOME are Medicare beneficiaries currently under care of an ophthalmologist or optometrist for two or more serious conditions, one of which is glaucoma, who would benefit significantly from CCM. These patients are likely poorly controlled. The ophthalmologist or optometrist provides the Icare HOME for the patient's use, reviews the collected IOP measurements, and telephones the patient or caregiver each month to discuss the findings and treatment plan. It is hoped that CCM with RPM engages the patient in their treatment, improves disease management, and reduces the cost of care.

3

**QUESTION:** Does Icare HOME qualify as a device for RPM?

**ANSWER:** Yes. In March, 2017, the Food and Drug Administration, under its 510(k) regulations, cleared the Icare HOME for marketing in the U.S.<sup>5</sup>

4

**QUESTION:** What CPT codes apply to RPM?

**ANSWER:** In 2019, CPT added three new procedure codes to report various aspects of RPM:

99453 – *Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment*

99454 – *Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate), initial; device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days*

99457 – *Remote physiologic monitoring treatment management services, 20 minutes or more of clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month*

Significantly, the 20 minute requirement is cumulative throughout the month of physician and staff time. Although not explicitly stated in CPT, it assumes 15 minutes of work by the billing practitioner per month.<sup>4</sup>

5

**QUESTION:** Does Medicare cover RPM?

**ANSWER:** Yes. Effective January 1, 2019, CMS incorporated coverage and payment of RPM in the Medicare Physician Fee Schedule.<sup>6</sup> This represents a favorable shift in Medicare policy compared with prior years.

April 29, 2019

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6

**QUESTION:** What does Medicare allow for RPM?

**ANSWER:** In 2019, the national Medicare Physician Fee Schedule allowable amounts, in-office, are:

99453 \$19 (*reported only once per episode of care; do not report for monitoring of less than 16 days*)

99454 \$64 (*report once at the end of each month; do not report for monitoring of less than 16 days*)

99457 \$52 (*report once each 30 days, regardless of the number of parameters monitored*)

The payment amounts are adjusted by local wage indices. Like most Medicare covered services, these amounts are subject to annual deductibles and copayments.

7

**QUESTION:** What level of supervision does RPM require?

**ANSWER:** Ophthalmic technicians or medical assistants are an important part of RPM for patient training on use of the Icare HOME, collection of IOP data, scheduling monthly follow-up phone calls, helping coordinate care with other providers, and answering basic questions about treatment such as how to instill eye drops. In the context of CCM, these activities are subject to direct supervision. It means that the physician or other qualified health care professional (*i.e.*, physician assistant or nurse practitioner) is present in the same location where the services are being furnished.

8

**QUESTION:** What chart documentation is required to support these codes?

**ANSWER:** CCM with IOP monitoring is only recommended by an ophthalmologist or optometrist after a thorough eye exam. A detailed, written explanation is provided to the patient with a provision to stop RPM at any time. A structured chart note is used to record the IOP data, interpretation, and physician treatment plan. The staff follow a strict billing protocol. Refer to the guidelines for CCM for more details.<sup>7</sup>

9

**QUESTION:** Are there code bundles or limitations?

**ANSWER:** CPT code 99457 cannot be reported in conjunction with 99091 (*Collection and interpretation of physiologic data*). Also, 99457 cannot be report on the same day as an eye exam. Lastly, 99490 (*Chronic care management*) and 99457 are complementary services, but time spent performing these services should remain separate and not be counted twice.

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- <sup>1</sup> Icare. News and Events. March 22, 2017. [Link here](#). Accessed 03/27/17.
- <sup>2</sup> FDA. 510(k) premarket approval. April 19, 2016. [Link here](#). Accessed 03/27/17.
- <sup>3</sup> Mudie, L, LaBarre, S, et al. Clinical Performance Study for Self-use of an Intraocular Pressure Measuring Device: the Icare Home Device (TA022). Annual meeting of the American Glaucoma Society. March 2016
- <sup>4</sup> CMS Medicare Learning Network, Chronic Care Management. [Link here](#). Accessed 4/25/19
- <sup>5</sup> FDA 501(k) clearance for Icare HOME tonometer, K163343, March 2017. [Link here](#). Accessed 4/24/19
- <sup>6</sup> Federal Register 11/23/18, p. 59492. CMS Physician Fee Schedule Final Rule [Link here](#). Accessed 4/20/19
- <sup>7</sup> CMS. FAQ about Physician Billing for CCM Services. [Link here](#). Accessed 4/28/19