Remote Patient Monitoring (telemonitoring) Applies to:



A nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association

X Blue Cross® Medicare Private Fee for Service (PFFS)

Remote patient monitoring

Remote patient monitoring, also called telemonitoring, is a type of ambulatory health care service that allows a patient to use an internet-capable device to perform a routine test and send the test data to a health care professional in real-time for analysis and follow-up.

Original Medicare

Original Medicare does not cover remote patient monitoring (telemonitoring) services.

Blue Cross Medicare PFFS Enhanced Benefit

Blue Cross Medicare PFFS is a Medicare Advantage Plan, which provides at least the same level of benefit coverage as Original Medicare (Part A and Part B) and may provide enhanced benefits beyond the scope of Original Medicare within a single health care plan. This flexibility allows Blue Cross to offer enriched plans by using Original Medicare as the base program and adding desired benefit options.

Coverage for Remote Patient Monitoring (Telemonitoring) is provided to members that meet the criteria and agree to participate in the Chronic Condition Management (CCM) program under the Blue Cross Medicare PFFS plan. Since Original Medicare does not cover remote patient monitoring, the scope of the benefit, reimbursement methodology, maximum allowed payment amounts and member cost sharing are determined by Blue Cross.

Members with a diagnosis of Heart Failure, Chronic Obstructive Pulmonary Disease, or Diabetes identified as high risk are potential candidates for telemonitoring. Only members who are referred, meet all program criteria (i.e., are in an independent living situation, currently enrolled, have no exclusionary conditions, etc.) and agree to participate in the CCM program, can receive the remote monitoring intervention. Members participating in a remote monitoring program will be sent a symptom appropriate monitor for their condition(s) and provided with the support needed to operate it. By placing the monitor in members' homes to track weight and/or other symptoms, the program helps provide timely, actionable information whenever the patient has a status change to both the patient and their regular health care provider. This direct feedback allows the patient's regular health care provider to initiate an intervention with the patient as needed. It also creates the opportunity for the patient to receive information from their own health care provider that will empower them to better self-manage their chronic condition.

Conditions for payment

The telemonitoring is provided under the administration of the CCM program and a single source provider under contract with Blue Cross delivers all services. Due to the structure of this program, the vendor service payments are administered under the terms of the contract and there is no billing of the member by the provider.

Reimbursement

All charges for services delivered by the telemonitoring provider are handled under the terms of the contract between Blue Cross and the provider.

Member cost sharing

Due to the structure of the telemonitoring program, the member has no cost share for services delivered by the contracted provider. Member program eligibility is verified by Blue Cross prior to the member's referral to the contracted provider for telemonitoring services.

Revision history

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08/22/2017: Removed all condition acronyms.

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