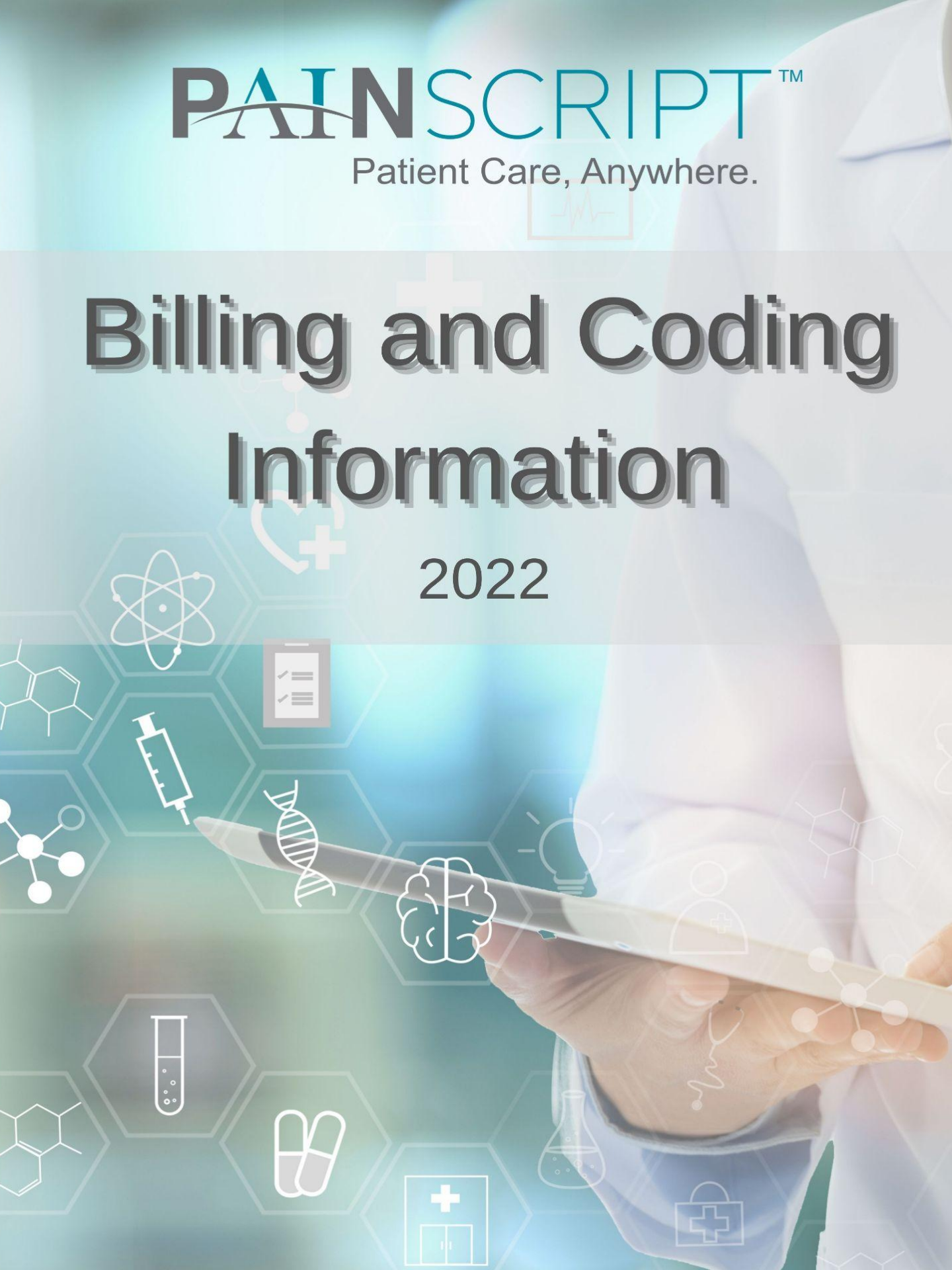


PAINSCRIPT™

Patient Care, Anywhere.

Billing and Coding Information

2022



CODING EXAMPLES – DIGITAL E/M

CPT code	Description	Medicare Reimbursement as per the Physician Fee Schedule (PFS) and Billing Frequency
99421	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes	\$14.61* - every 7 days
99422	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes	\$28.59* - every 7 days
99423	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes	\$46.48* - every 7 days
CPT code	Description	Medicare Reimbursement as per the Physician Fee Schedule (PFS) and Billing Frequency
98970	Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes	\$11.47* - every 7 days
98971	Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes	\$20.23* - every 7 days
98972	Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes	\$31.34* - every 7 days

In all types of locations including the patient's home, and in all areas (not just rural), new or established Medicare patients may have non-face-to-face patient-initiated communications with their doctors or other practitioners. These services are not a substitute for an in-person visit, but are exchanges with Qualified Healthcare Professionals and Qualified Nonphysician Healthcare Professionals online through a patient portal.

- This is not limited to only rural settings. There are no geographic or location restrictions for these visits.
- Patients communicate with their doctors without going to the doctor's office by using online patient portals.
- Individual services need to be initiated by the patient; however, practitioners may educate beneficiaries on the availability of the service prior to patient initiation.



*Coding is a clinical decision and should be to the highest level of specificity. This example is provided for informational purposes only. Information is subject to change; contact the appropriate payor for specific current coverage and coding guidance in addition to reimbursement rates. Individual patient billing will vary based on multiple factors and determination of coverage, coding, or reimbursement is not implied. Coverage, deductible, coinsurance, copays and reimbursement rates are based upon payor/plan specifics and/or payor contracts. CPT® codes and descriptions are copyright of the American Medical Association. CPT® is a registered trademark of the American Medical Association (AMA). All rights reserved.

BILLING AND CODING INFORMATION

PAINSCRIPT PLATFORM IN
CONJUNCTION WITH REMOTE
PATIENT MONITORING
(RPM) DEVICES



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CODING EXAMPLES – REMOTE PATIENT MONITORING (RPM)

CPT code	Description	Medicare Reimbursement as per the Physician Fee Schedule (PFS)
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	\$17.45*
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	\$51.16*
99457	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; first 20 minutes	\$47.66*
99458	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; each additional 20 minutes (List separately in addition to code for primary procedure)	\$39.07*

Physicians potentially may utilize devices eligible for reimbursement in addition to utilizing the PainScript Portal.

The above codes represent common Remote Patient Monitoring (RPM) codes and according to the American Medical Association (AMA) must meet certain criteria in order to bill:

- There is a medical device as defined by Section 201(h) of the Federal Food, Drug, and Cosmetic Act: a device is: An instrument, apparatus, implement, machine, contrivance, implant, in vitro reagent, or other similar or related article, including a component part, or accessory which is: recognized in the official National Formulary, or the United States Pharmacopoeia, or any supplement to them, intended for use in the diagnosis of disease or other conditions, or in the cure, mitigation, treatment, or prevention of disease, in man or other animals, or intended to affect the structure or any function of the body of man or other animals, and which does not achieve its primary intended purposes through chemical action within or on the body of man or other animals and which does not achieve its primary intended purposes through chemical action within or on the body of man or other animals and which is not dependent upon being metabolized for the achievement of its primary intended purposes. The term "device" does not include software functions excluded pursuant to section 520(o).
- There is “interactive communication” as a two-way audio conversation such as a phone call, that can be enhanced with video.
- The data must be electronically (i.e., automatically) collected and transmitted rather than self-reported.
- Used to report remote physiologic monitoring services.

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