


NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES

# GUIDANCE DOCUMENT

“This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Nebraska Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.”

Pursuant to  
Neb. Rev. Stat. § 84-901.03

**To:** All Providers Participating in the Nebraska Medicaid Program  
**From:** Drew Gonshorowski, Director   
**Date:** May 1, 2026  
**Re:** Coverage for Remote Physiologic Monitoring

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This provider bulletin is being issued to notify Nebraska Medicaid providers that Nebraska Medicaid will provide coverage for remote physiologic monitoring (RPM) for eligible beneficiaries when medically necessary, **effective July 1, 2026.**

Remote Physiologic Monitoring (RPM) is the automatic collection and electronic transmission of a beneficiary's physiologic data that is analyzed and used by the treating practitioner to develop and manage a plan of treatment related to the beneficiary's medical diagnosis.

RPM allows a beneficiary to measure their physiologic health data (for example, blood pressure, pulse oximetry) using a digital medical device that automatically transmits the data from their location to their treating practitioner in a different location. The treating practitioner then uses the data to make treatment recommendations.

The three key components of RPM are:

- Education and setup: the beneficiary learns how to properly use the digital medical device and collect the health data accurately.
- Device supply: the beneficiary is provided with an appropriate digital medical device and has internet connection necessary to transmit the health data.
- Treatment and management: the treating practitioner reviews the transmitted health data to make informed clinical decisions to treat and manage the beneficiary's medical diagnosis.

Remote physiologic monitoring must be administered in a manner that is consistent with the quality of clinical care provided in person.

RPM may be considered medically necessary when all the following criteria are met:

1. The beneficiary has one or more of the following diagnoses:
  - Heart failure (HF)
  - Hypertensive disorders of pregnancy (HDP), *and*
2. The beneficiary is an established patient of the treating practitioner, *and*
3. RPM must be ordered by and supervised by the treating practitioner, *and*
4. The treating practitioner must document all the following in the beneficiary's medical record:
  - The beneficiary's physical, cognitive and behavioral abilities are adequate to operate the digital medical device or has a willing and capable caregiver to assist in RPM, *and*
  - an FDA-approved digital medical device for RPM will be used, *and*
  - The beneficiary's home environment is compatible with the safe and effective use of the digital medical device, including the necessary internet connection, *and*
  - The beneficiary's verbal or written consent for RPM is obtained. In extenuating circumstances when consent cannot be obtained, the reason must be documented, *and*
  - The specific clinical data to be measured by the digital medical device for the symptoms and diagnosis under treatment, *and*

- The clinical goals for the RPM, *and*
  - The anticipated duration of monitoring is consistent with the treatment and management plan, *and*
  - The beneficiary is not receiving concurrent home health care, *and*
5. RPM must conform to professional standards of care: ethical practice, scope of practice, and other relevant federal, state policies and requirements, such as HIPPA compliance, Practice Act and Licensing Board rules, *and*
  6. RPM is not used while the beneficiary is in a hospital, nursing facility, or other facility, *and*
  7. RPM is not primarily for the convenience of the beneficiary, treating practitioner, caregiver, or other health care provider.

Remote Physiologic Monitoring is considered not medically necessary when the above criteria are not met because there is insufficient evidence in the peer-reviewed medical literature of efficacy and clinical value.

## Applicable Remote Physiologic Monitoring Codes:

Code	Description	Billing Guidance
99453	Remote monitoring of physiologic parameters initial set-up and patient education on use of equipment	One-time fee
99454	Remote monitoring of physiologic parameters; device supply with daily recordings or programmed alerts transmission, 16-30 days in a 30-day period	Devices FDA approved for 99454: blood pressure cuff, pulse oximetry, digital weight scale. Billed once every 30 days.
99445	Remote monitoring of physiologic parameters; device supply with daily recordings or programmed alerts transmission, 2-15 days in a 30-day period	Billed once every 30 days
99457	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring 1 real-time interactive communication with the patient/caregiver during the calendar month, first 20 minutes	Bill 99470 if time spent is 10 minutes or less. Billed once every 30 days
99458	Each additional 20 minutes	Bill 99457 first. Bill once every 30 days
99470	Remote physiologic monitoring treatment management services during the calendar month, first 10 minutes.	Bill once every 30 days.

Both hospitals and nursing facilities, who provide RPM services for individuals outside of their facility, must bill for the RPM services on a CMS-1500 (professional) claim form. Reimbursement rates for the aforementioned services will follow the Physician fee schedule and are not subject to inclusion in the facility's cost report for purposes of rate rebasing or cost-to-reimbursement settlement.

## Provider Resources

If you have questions regarding this bulletin, please contact Health Services via email at: DHHS.[MLTCPhysicalHealth@nebraska.gov](mailto:MLTCPhysicalHealth@nebraska.gov). Health plans should also copy their contract manager.

Provider bulletins, such as this one, are posted on the DHHS website at <http://dhhs.ne.gov/pages/Medicaid-Provider-Bulletins.aspx>. Please subscribe to the page to help you stay up to date about new provider bulletins.