

# Remote Patient Monitoring & Remote Therapeutic Monitoring

## Executive

## Quick Start Guide



**CALIFORNIA  
TELEHEALTH  
RESOURCE  
CENTER**

Part of **OCHIN**

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## ABOUT CTRC

The California Telehealth Resource Center (CTRC) offers no-cost, unbiased training, educational resources, and technical assistance to help California providers and patients get the most from telehealth. As the federally designated telehealth resource center for the region, we offer unbiased tools and services based upon proven telehealth practices. We create lasting change and improvement by focusing on implementation, sustainability, reimbursement and policy, integration, workflows, and patient/provider adoption.

As part of the National Consortium of Telehealth Resource Centers and the OCHIN family of companies, CTRC assists thousands of providers and patients annually. We have extensive experience supporting the healthcare safety net, rural and urban providers, and patients and families throughout California who would otherwise be unable to access quality healthcare due to geographic isolation, language/cultural barriers, lack of insurance, disability, homelessness, and more.



## Executive Quick Start Guide

### RPM and RTM: Building a Sustainable Monitoring Program That Improves Care

Remote monitoring programs are most effective when designed as structured clinical services, not simply as device distribution initiatives. Successful RPM (Remote Physiological Monitoring) and RTM (Remote Therapeutic Monitoring) programs integrate clinical workflows, escalation protocols, patient education, and sustainable reimbursement strategies. CTRC supports organizations in differentiating RPM (physiological data such as blood pressure, glucose, and weight) from RTM (therapeutic and behavioral data), selecting the right modality based on clinical goals, and implementing scalable models that improve outcomes, access, and financial sustainability.

### What problem or need are you addressing?

Unstructured monitoring can often result in programs can create data overload without actionable workflows, increased staff burden and burnout, low patient adherence, and limited clinical impact. The goal is to build a right-sized RPM/RTM service focused on a defined patient cohort, measurable outcomes, and clear care team actions that reduce avoidable utilization and improve health outcomes.



## 30 / 60 / 90-Day Action Plan

### First 30 Days: Define Focus

- Select one patient cohort and one primary outcome (e.g., hypertension control, CHF decompensation reduction, COPD exacerbations)
- Determine whether RPM, RTM, or a hybrid model best supports the clinical objective
- Define what clinical actions will occur when data trends or remembering thresholds are reached

### Next 30 Days: Build Infrastructure

- Budget for operational needs including onboarding, device logistics, patient education, and staff review time
- Confirm payer coverage, CPT requirements, and documentation standards by modality and provider type
- Establish escalation protocols and patient communication workflows

### Final 30 Days: Pilot and Optimize

- Launch a 90-day pilot with clear inclusion and exclusion criteria
- Hold weekly operations huddles to review performance, barriers, and workflow adjustments
- Track early metrics and refine processes before scaling



## Evidence Snapshot: Why this approach works

- CMS guidance outlines operational, compliance, and reimbursement requirements for RPM and telehealth-related services
- The AMA RPM Implementation Playbook emphasizes structured planning, workflow integration, and targeted patient populations as key drivers of success
- Research consistently shows RPM programs perform best when paired with timely clinical intervention rather than passive data collection

## Safety & Regulatory Musts

- Ensure all platforms and devices comply with HIPAA and cybersecurity standards
- Complete or update a Security Risk Analysis prior to program launch
- Confirm whether any tools qualify as regulated medical devices or clinical decision support systems requiring additional oversight
- Provide accessibility accommodations and language support to avoid civil rights risks

## Payment & Sustainability: Verify Early

- RPM and RTM each use distinct CPT code families with specific documentation requirements
- Do not bill RPM/RTM as standard telehealth visits
- For FQHCs and RHCs, confirm how monitoring services fit within encounter-based payment models
- Create payer-specific documentation checklists including:
  - Days monitored
  - Minutes of management time
  - Eligible staff involvement

This reduces claim denials and audit risk.



## Liability & Audit Readiness

- Establish escalation policies with defined response times (for example, same-day response for critical values)
- Clearly educate patients on:
  - What is monitored
  - When the clinic will respond
  - When to call 911 or seek urgent care
- Document patient training and device instructions
- Ensure vendor contracts define:
  - Data availability standards
  - Downtime procedures
  - Responsibility for device failures or replacements

## Key Success Metrics

### ***Program Performance***

- Enrollment and retention rates
- Percentage of patients transmitting usable data
- Time to clinical intervention after abnormal values

### ***Clinical Outcomes***

- Blood pressure control
- A1c changes
- COPD exacerbations
- CHF admissions

### ***Operational Impact***

- Minutes of staff time per patient per week
- Inbox message volume
- Device replacement rates

### ***Access***

- Language accommodation provided
- Disability accessibility
- Broadband or technology gaps



### **CTRC Calls to Action**

- Use the [CTRC RPM Toolkit](#) to design workflows, escalation protocols, and documentation processes
- Use the [CTRC RPM Vendor Selection Toolkit](#) to evaluate platforms based on compliance, usability, integration, and sustainability

### Trusted Resources

- [AMA Remote Patient Monitoring Playbook | AMA](#)
- [Centers for Medicare & Medicaid Services. \(2024\). \*Telehealth services and remote patient monitoring.\*](#)
- CMS MLN: Telehealth & RPM (PDF): [MLN901705 -Telehealth & Remote Patient Monitoring](#)
- ONC/ASTP Security Risk Assessment Tool: [Security Risk Assessment Tool - ASTP - Assistant Secretary for Technology Policy](#)
- HHS Telehealth and RPM: [Preparing patients for remote patient monitoring | Telehealth.HHS.gov](#)
- HHS RPM Research: [Telehealth Research Recap: Remote Patient Monitoring](#)



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