

Table 10A: Beneficiaries with COPD and/or Asthma for Whom Telemonitoring Was Billed, by HCPCS Code and Claim Type, 2015

HCPCS Code and Description of Code, by descending number of beneficiaries		Unique number of beneficiaries	Number of beneficiaries with COPD or Asthma		Total Reimbursement		
			COPD	Asthma	Total (Physician & Outpatient)	Physician	Outpatient
Q3014	Telehealth originating site facility fee	507	403	249	\$27,666	\$17,083	\$10,584
99213	Level 3 outpatient visit for evaluation and management of established patient with problem of low to moderate severity, including expanded history and medical decision making of low complexity - typical time with patient and/or family 15 minutes	318	249	160	\$31,211	\$30,840	\$371
99214	Level 4 outpatient visit for evaluation and management of established patient with problem of moderate to high severity, including detailed history and medical decision making of moderate complexity - typical time with patient and/or family 25 minutes	248	201	117	\$30,718	\$29,556	\$1,162
90792	Psychiatric diagnostic evaluation with medical services	161	125	91	\$17,070	\$16,982	\$87
G0425	Emergency Department or initial inpatient telehealth consultation	113	97	52	\$9,142	\$9,048	\$94
99212	Level 2 outpatient visit for evaluation and management of established patient with self-limited and/or minor problem, including problem-focused history and physical examination, and straightforward medical decision-making - typical time with patient and/or family 10 minutes or less	77	56	44	\$3,610	\$3,591	\$19
G0427	Emergency Department or initial inpatient telehealth consultation	70	61	31	\$11,010	\$11,010	\$0
G0426	Emergency Department or initial inpatient telehealth consultation	43	40	16	\$3,753	\$3,753	
90791	Psychiatric diagnostic evaluation	36	32	18	\$3,239	\$3,153	\$86
99215	Level 5 outpatient visit for evaluation and management of established patient with problem of moderate to high severity, including comprehensive history and physical examination - typical time with patient and/or family 40 minutes	34	26	18	\$2,588	\$2,419	\$169
G0407	Follow-up inpatient telehealth consultation, Intermediate	34	30	12	\$5,906	\$5,906	
G0408	Follow-up inpatient telehealth consultation, complex	33	31	9	\$4,569	\$4,569	
99232	Level 2 subsequent hospital care for evaluation and management of patient, including expanded problem focused interval history and medical decision making of moderate complexity - typical time 25 minutes	32	24	14	\$2,531	\$2,531	
G0406	Follow-up inpatient telehealth consultation, limited	29	28	10	\$2,327	\$2,327	

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99309	Level 3 subsequent nursing facility care for evaluation and management of patient, including detailed interval history and medical decision making of moderate complexity - typical time 25 minutes	27	24	4	\$2,654	\$2,654	
90832	Psychotherapy with family member - 30 minutes	24	23	12	\$7,647	\$7,348	\$299
99204	Level 4 outpatient visit for evaluation and management of new patient with problem of moderate to high severity, including comprehensive history and physical examination, and medical decision making of moderate complexity - typical time with patient and/or family 45 minutes	23	19	12	\$2,517	\$2,222	\$295
99233	Level 3 subsequent hospital care for evaluation and management of patient, including detailed interval history and medical decision making of moderate complexity - typical time 25 minutes	19	17	6	\$1,894	\$1,894	
90833	Psychotherapy with family member - 30 minutes with evaluation and management service	18	11	12	\$1,641	\$1,641	\$0
99205	Level 5 outpatient visit for evaluation and management of new patient with problem of moderate to high severity, including comprehensive history and physical examination, and medical decision making of high complexity - typical time with patient and/or family 60 minutes	16	12	8	\$2,229	\$2,229	
90837	Psychotherapy with family member- 60 minutes	15	11	6	\$1,852	\$1,852	
99203	Level 3 outpatient visit for evaluation and management of new patient with problem of moderate severity, including detailed history and physical examination, and medical decision making of low complexity - typical time with patient and/or family 30 minutes	15	12	8	\$955	\$955	
90834	Psychotherapy with family member - 45 minutes	13	11	8	\$3,775	\$3,775	
99308	Level 2 subsequent nursing facility care for evaluation and management of patient, including expanded problem focused interval history and medical decision making of low complexity - typical time 15 minutes	12	12	1	\$575	\$575	
99202	Level 2 outpatient visit for evaluation and management of new patient with problem of low to moderate severity, including expanded problem-focused history and physical examination, and straightforward medical decision-making - typical time with patient and/or family 20 minutes	8	5	3	\$447	\$447	

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99211	Level 1 outpatient visit for evaluation and management of established patient with minimal presenting problem, without history, physical examination, or medical decision making - typical time less than 5 minutes	7	3	5	\$113	\$113	
99307	Level 1 subsequent nursing facility care for evaluation and management of patient, including problem focused interval history and physical examination - typical time 10 minutes	7	4	5	\$488	\$488	
G0463	Hospital outpatient clinic visit for assessment and management of a patient	7	6	3	\$598		\$598
90960	ESRD related monthly services	6	6	3	\$6,173	\$6,173	
99231	Level 1 subsequent hospital care for evaluation and management of patient, including detailed history and physical examination, and medical decision making of low complexity - typical time 15 minutes	6	5	2	\$259	\$259	
99310	Level 4 subsequent nursing facility care for evaluation and management of patient, including comprehensive interval history and medical decision making of high complexity - typical time 35 minutes	6	6	2	\$678	\$678	
G0459	Inpatient telehealth pharmacologic management, including prescription, use, and review of medication with no more than minimal medical psychotherapy	6	5	3	\$513	\$513	
G0467	Federally qualified health center (fqhc) visit, established patient; a medically-necessary, face-to-face encounter (one-on-one) between an established patient and a fqhc practitioner during which time one or more fqhc services are rendered and includes a typical bundle of Medicare-covered services that would be furnished per diem to a patient receiving a fqhc visit	5	5	2	\$544		\$544
90836	Psychotherapy with family member - 45 minutes with evaluation and management service	4	3	2	\$441	\$441	\$0
99201	Level 1 outpatient visit for evaluation and management of new patient with self-limited and/or minor problem, including problem-focused history and physical examination, and straightforward medical decision-making - typical time with patient and/or family 10 minutes or less	3	2	1	\$103	\$103	
90961	ESRD related monthly services	2	2	0	\$1,757	\$1,757	
80048	Basic metabolic panel	1	0	1	\$11		\$11

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			COPD	Asthma	Total (Physician & Outpatient)	Physician	Outpatient
97012	Application of mechanical traction	1	1	0	\$0	\$0	
97014	Application of electrical stimulation	1	0	1	\$0	\$0	
97110	Therapeutic exercises to develop strength and endurance, range of motion and flexibility	1	1	0	\$0	\$0	
97802	Medical nutrition therapy, initial assessment and intervention	1	1	0	\$83	\$83	
99220	Level 3 initial observation care for evaluation and management of patient with problem of high severity, including comprehensive history and physical examination, and medical decision making of high complexity - typical time 70 minutes	1	1	0	\$141		\$141
99401	Preventive medicine counseling and risk factor reduction intervention for individual - approximately 15 minutes	1	0	1	\$0	\$0	
99406	Intermediate tobacco use cessation counseling for individual - 3-10 minutes	1	1	0	\$18	\$18	
99495	Transitional care management service including communication with patient and/or caregiver within 2 business days of discharge, medical decision making of moderate complexity, and face to face visit with 14 days after discharge	1	1	1	\$121	\$121	
99496	Transitional care management service including communication with patient and/or caregiver, medical decision making of high complexity, and face to face visit after discharge	1	1	0	\$179	\$179	

Source: Medicare 5-percent Limited Dataset

Notes: Number of events not inflated to national level. Includes Medicare Part A & B, FFS beneficiaries. Beneficiary population is that with a diagnosis prior to 2015 and used by the CCW to identify the condition. Unique number of beneficiaries is that with COPD and/or asthma. Telemedicine is indicated by a modifier of GT or GQ for CPT/HCPCS codes or HCPCS codes G0406-G0408, G0425-G0427, or Q3014.

Table 10B: Medicare Reimbursement for Beneficiaries with COPD and/or Asthma, by Receipt of Telemedicine Services, 2015

Condition	Number of beneficiaries			Total reimbursement						Telemedicine share of reimbursement
	Total	With telemedicine services	Percent with telemedicine services	Telemedicine			Total			
				Total	Physician	Outpatient	Total	Physician	Outpatient	
All	326,679	1,175	0.4	\$193,745	\$179,284	\$14,461	\$4,929,325,421	\$1,040,735,840	\$707,426,200	3.4%
COPD	252,999	946	0.4	\$163,122	\$150,049	\$13,072	\$4,185,539,925	\$840,417,962	\$566,106,526	3.5%
COPD but not asthma	180,231	606	0.3	\$106,032	\$96,760	\$9,272	\$2,759,671,486	\$556,435,000	\$386,054,434	3.9%
Asthma	146,448	569	0.4	\$87,713	\$82,524	\$5,189	\$2,169,653,935	\$484,300,840	\$321,371,766	2.9%
Asthma but not COPD	73,680	229	0.3	\$30,623	\$29,235	\$1,389	\$743,785,496	\$200,317,877	\$141,319,675	3.1%
COPD and asthma	72,768	340	0.5	\$57,090	\$53,290	\$3,800	\$1,425,868,439	\$283,982,962	\$180,052,091	2.7%

Source: Medicare 5-percent Limited Dataset

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Table 10C: Distribution of Medicare Reimbursement for Beneficiaries with COPD or Asthma, by Receipt of Telemedicine Services, 2015

		COPD		Asthma	
		Without telemedicine	With telemedicine	Without telemedicine	With telemedicine
Number of beneficiaries		252,053	946	145,879	569
Total payments	Mean	\$16,477	\$34,397	\$14,741	\$33,818
	25th percentile	\$0	\$5,896	\$0	\$5,961
	Median	\$3,979	\$18,222	\$3,262	\$17,080
	75th percentile	\$18,984	\$47,909	\$15,897	\$45,821
Inpatient payments	Mean	\$7,030	\$16,371	\$6,061	\$16,061
	25th percentile	\$0	\$0	\$0	\$0
	Median	\$0	\$5,430	\$0	\$4,741
	75th percentile	\$5,571	\$23,292	\$3,587	\$22,004
Outpatient payments	Mean	\$2,226	\$5,201	\$2,181	\$5,601
	25th percentile	\$0	\$913	\$0	\$1,173
	Median	\$259	\$2,475	\$233	\$2,762
	75th percentile	\$1,870	\$5,834	\$1,888	\$6,507
Physician/ supplier payments	Mean	\$3,313	\$5,624	\$3,295	\$6,270
	25th percentile	\$0	\$1,765	\$0	\$2,015
	Median	\$1,399	\$3,785	\$1,411	\$4,181
	75th percentile	\$4,255	\$7,189	\$4,329	\$8,179

Source: Medicare 5-percent Limited Dataset

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