Coding Tip: Ambulatory Continuous Glucose Monitoring

The Society for Maternal-Fetal Medicine (SMFM) Coding Committee; Madhurima K. Keerthy, MD; Trisha Malisch, CCS-P, CPC, COBGC, Steve Rad, MD



There are currently three CPT codes specific to continuous glucose monitoring (CGM) services.

The first two codes are for the hook-up, calibration, sensor placement, patient training, and initial printout. The codes are differentiated by whether the patient provided the equipment ("personal CGM"), or the physician or other qualified health care professional (office) provided the equipment ("professional CGM").

95249 Ambulatory continuous glucose monitoring of interstitial tissue fluid via a subcutaneous sensor for a minimum of 72 hours; **patient-provided equipment**, sensor placement, hook-up, calibration of monitor, patient training, and printout of recording

95250 Ambulatory continuous glucose monitoring of interstitial tissue fluid via a subcutaneous sensor for a minimum of 72 hours; **physician or other qualified health care professional (office) provided equipment**, sensor placement, hook-up, calibration of monitor, patient training, removal of sensor, and printout of recording

CPT codes 95249 and 95250 may be billed once per calendar month, and may be done remotely:

- 95249/95250 cannot be reported in conjunction with 99091 and/or 0446T
- <u>95249 can be reported once during the period the patient owns the receiver</u>. If the patient obtains a new receiver, 95249 may be reported for a subsequent period of data collection
- 95250 can be reported once per calendar month
- A significant, separately identifiable evaluation and management service may be billed on the same date as 95249 or 95250 when documented. Modifier 25 should be appended to the E/M CPT code
- 95250 includes removal of sensor, when performed. 95249 does not include removal of sensor

In addition to the equipment setup and training codes, CPT code 95251 is reported for physician or other qualified health care professional analysis, interpretation and report of CGM data.

95251 Ambulatory continuous glucose monitoring of interstitial tissue fluid via a subcutaneous sensor for a minimum of 72 hours; **analysis, interpretation and report**

CPT 95251 may be billed once per calendar month, and does not require a face-to-face service.

- 95251 cannot be reported in conjunction with 99091
- 95251 does not include a patient assessment or developing a plan of care
- A significant, separately identifiable evaluation and management service may be billed on the same date when documented. Modifier 25 should be appended to the E/M CPT code

If the physician practice supplies a sensor to the patient, please see HCPCS code A9276 Sensor; invasive (e.g., subcutaneous), disposable, for use with interstitial continuous glucose monitoring system, 1 unit = 1 day supply (bill in addition to 95250, when provided).

Documentation for 95249/95250 should include:

- Indication for the device placement
- Authorization obtained, if needed
- Patient is trained on CGM and precautions
- Education is given on the CGM device and functions
- Skin is prepped, and the sensor is placed
- Equipment is calibrated
- Transmitter is attached, and receiver is initiated
- Once monitoring period is over, the sensor is removed, and data is collected

Documentation for 95251 should include:

- Indication for the device placement
- Name/Type of device placed
- Sensor placement date and sensor removal date
- Duration that the patient wore the device (must be minimum of 72 hours)
- Date of printout of data
- Analysis of data
- Interpretation of data
- Signature of interpreting physician or other qualified healthcare professional

Please submit any questions you may have to the SMFM Coding Committee Ask a Coding Question website (https://www.smfm.org/coding/questions/new). Additional information and resources are also available on our coding website. Thank you very much.