

HLB's Digital Health Blog

Insights

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CMS Proposes Significant Changes to RPM and RTM Services

In the CY 2027 Medicare Physician Fee Schedule proposed rule, CMS is proposing several notable changes to Remote Physiologic Monitoring (RPM) and Remote Therapeutic Monitoring (RTM) services. First, CMS would limit RPM and RTM billing to established patients. CMS proposes requiring a separately billable initiating visit before RPM or RTM services begin, meaning the billing practitioner must initiate the services during an in-person or telehealth encounter. Additionally, CMS proposes that the clinical staff time used to furnish RPM and RTM services be provided only by individuals directly employed by the billing practitioner or practice, rather than outsourced third parties. CMS states that the proposal is responsive to multiple OIG reports raising concerns about care fragmentation and insufficient practitioner oversight when monitoring services are outsourced. Comments are due September 14, 2026.

HHS OIG Updates Work Plan to Include HHS AI Audit

The U.S. Department of Health and Human Services (HHS) Office of Inspector General (OIG) [announced](#) an audit of HHS governance of artificial intelligence (AI). Given HHS' reliance on AI tools to support public health surveillance, fraud detection, and administrative automation, OIG believes it is important that HHS fully establish and implement a comprehensive AI governance framework to manage risks. OIG will conduct the audit to determine whether HHS has established AI governance in accordance with Federal and HHS requirements.

[Digital Health Blog – Hooper, Lundy & Bookman](#)

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