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## New Resources for Telehealth Chronic Care Management (CCM) Rules

Nathaniel M. Lacktman

Foley &amp; Lardner LLP

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More good news for hospitals, health care providers, and entrepreneurs interested in *telehealth* and *Chronic Care Management (CCM)*. CMS **just recently introduced** a new educational initiative called **Connected Care: the Chronic Care Management Resource**. The initiative is designed to raise awareness of the benefits of CCM services for Medicare beneficiaries with multiple chronic conditions and to provide health care professionals with support to implement CCM programs.

CCM is a powerful, patient-oriented service covered by Medicare since 2015, and perfectly suited for tech-savvy providers and telehealth practices, as CCM may be provided via remote care services. CCM is another way health care providers and software companies can harness telemedicine technology to leverage staffing, improve patient care, increase doctor-patient contact, decrease inpatient length of stay, and ultimately reduce overall patient costs. The CCM and Complex CCM billing codes pay providers on a monthly capitated (per patient per month) basis.

- CPT 99490 allows eligible practitioners and suppliers to bill for at least 20 minutes of non-face-to-face clinical staff time directed by a physician or other qualified health professionals each month to coordinate care for beneficiaries who have two or more serious chronic conditions that are expected to last at least 12 months.
- CPT 99487 is for complex CCM that requires substantial revision of a care plan, moderate or high

complexity medical decision making, and 60 minutes of clinical staff time.

- CPT 99489 is a complex CCM add-on code for each additional 30 minutes of clinical staff time.
- HCPCS G0506 is an add-on code to the CCM initiating visit for providing a comprehensive assessment and care planning to patients.

CMS recognizes CCM as one of the critical components of primary care that contributes to better health and care for individuals, and holds promise for reducing overall health care costs. Indeed, CCM can be used in many settings, including primary care, gerontology, and **even in the hospital setting**. Hospitals offering outpatient CCM services may bill Medicare under the Outpatient Prospective Payment System (“OPPS”) for the facility portion of the service. In addition, Medicare will pay for the physician/practitioner time directing the CCM services under the Physician Fee Schedule.

Connected Care is a nationwide effort within fee-for-service Medicare that includes a focus on racial and ethnic minorities, as well as rural populations, who tend to have higher rates of chronic disease. The initiative was developed by the CMS Office of Minority Health and the Federal Office of Rural Health Policy at the Health Resources and Service Administration.

Here are some of the resources available to help educate patients and health care providers on CCM services:

- A Health Care Professional Toolkit CCM Services
- A partner toolkit that includes downloadable resources and suggested activities to get involved in the Connected Care initiative
- Patient education resources, including promotional posters and postcards that providers can use in a clinical or community setting
- CMS CCM Services Fact Sheet
- CMS Frequently Asked Questions about Physician Billing for Chronic Care Management Services

Hospitals, health care providers, and other companies using telehealth and non-face-to-face technologies to develop patient population health and care coordination services should take a serious look at CCM billing, and keep abreast of developments that can drive recurring revenue and improve the patient care experience.

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