



Don't Leave Money on the Table

Depending on your location and a few other factors, CCM payment is in the range of \$42.91 per patient per month, which is approximately \$515 per patient per year. So, if you provide CCM to 100 patients per year, your practice can earn up to \$51,500 in additional revenue annually. CMS estimates that 68% of Medicare patients will mostly likely meet these conditions.

Code 99490 presents a significant opportunity for your practice to increase revenue simply by billing for what you're already doing.

Who qualifies? To qualify for CCM, patients must have two or more chronic health conditions that are expected to last at least 12 months or until death. These conditions must place the patient at significant risk of death, acute exacerbation, decompensation or functional decline. The patient must also have an established care plan.

What do you need to do?

Many CCM requirements are also part of other programs such as Meaningful Use, so your practice may already be incorporating these requirements into its workflow. To bill for CCM, CMS requires practices to provide:

- 24/7 access to address the condition
- Continuity of care with a provider the patient can see routinely
- Systematic assessment of the patient's needs
- A well-documented care plan
- Care transition management
- Enhanced patient communication options — beyond the phone

Want to learn more about our Chronic Care Management module? Contact Janine Job at 404-207-1292 or via email at JJJob@HealthSystems.net.

Chronic Care Management

Primary Ins: Medicare Part B Secondary Ins: Consolidated Healthcare Company

Previous Patient Opt: In Previous Opt Date: 02/03/2015

Patient Opt: In Out Date: 02/03/2015 Insert Previous

Initial Care Plan Provided to Patient: 02/27/2015

Updated Care Plan Provided to Patient: Yes No

Chronic Care Management Diagnosis:

ATRIAL FIBRILLATION - PAROXYSMAL (ICD-427.31) (12/18/2008)
 HYPERCHOLESTEROLEMIA (ICD-272.0) (06/21/1999)
 CORONARY ATHEROSCLEROSIS - NATIVE VESSEL (ICD-414.01) (06/06/1999)
 OLD INFERIOR MYOCARDIAL INFARCTION (ICD-412) (01/03/2003)
 CHRONIC OBSTRUCTIVE PULMONARY DISEASE (ICD-496) (12/22/1999)

CCM Patient, CCM Patient Date and Verified By MUST be entered

CCM Patient Date: 03/02/2015 Verified By: Harry S Winston MD Me

Date: Today Service Performed: _____

Minutes Spent on Service: _____ Service Performed By: _____ Me

CCM Service Performed:

Date: 03/21/2015 Service: Addedum to existing progress notes Minutes Spent on Service: 3 Performed By: Harry S Winston MD



Partner
Healthcare



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