





## CONNECTED CARE

THE CHRONIC CARE MANAGEMENT RESOURCE

The Centers for Medicare & Medicaid Services (CMS) has adopted separately billable codes to improve payment and access to chronic care management (CCM) services for Medicare beneficiaries with two or more serious chronic conditions.

Health care professionals have an opportunity to be separately paid for important services while improving your Medicare patients' self-management, health outcomes, and patient satisfaction. By using the CCM codes below, your practice can be separately reimbursed for important care management services that it provides to fee-for service Medicare patients with two or more chronic conditions that are expected to last at least 12 months and place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline.









Your patients will gain a team of dedicated health care professionals who can help them plan for better health and stay on track. Services such as monthly check-ins and ready access to their care team can help them connect the dots and improve their care coordination.

If you're not offering CCM services, you may be missing out on the opportunity to provide the connected care your Medicare patients need and want, while simultaneously growing your practice.

Some of the tools and resources available to you to successfully implement and bill for CCM services include:

- Information about CCM and its benefits
- Billing and eligibility information
- Frequently asked questions
- Resources to help educate your patients about CCM
- Information about upcoming webinars where you can learn more and ask questions

To access these resources and to learn more about CCM, visit: go.cms.gov/ccm