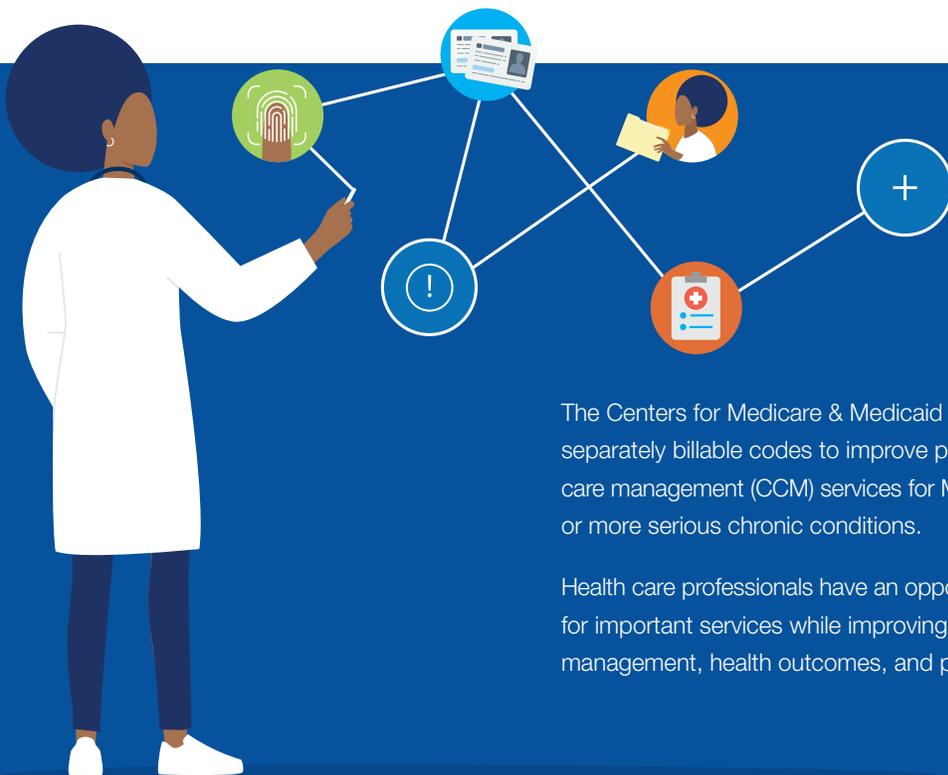




CONNECTED CARE



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 paid separately for important services while improving Medicare patients' self-management, health outcomes, and patient satisfaction.



By using the payment codes for chronic care management, your practice can be separately reimbursed for important services that it provides to Medicare Fee-For-Service patients with two or more chronic conditions.

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.

- Information about CCM and its benefits
- Eligibility and billing information
- Frequently asked questions
- Resources to help educate your patients about CCM

