

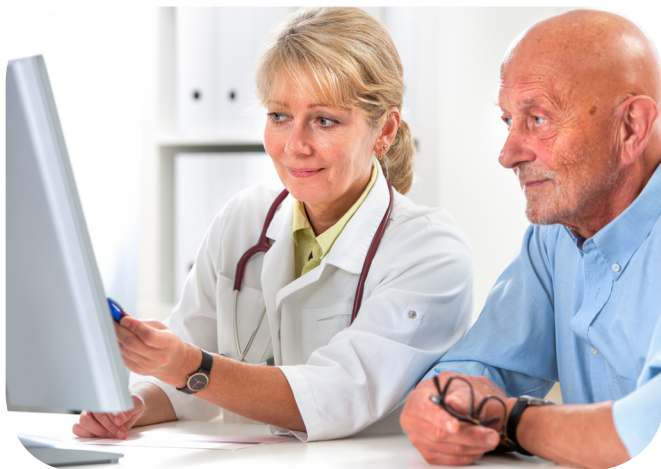
CHRONIC CARE MANAGEMENT

CPT Code 99490

Two-thirds of Medicare beneficiaries had two or more chronic conditions, and one-third had four or more chronic conditions.*

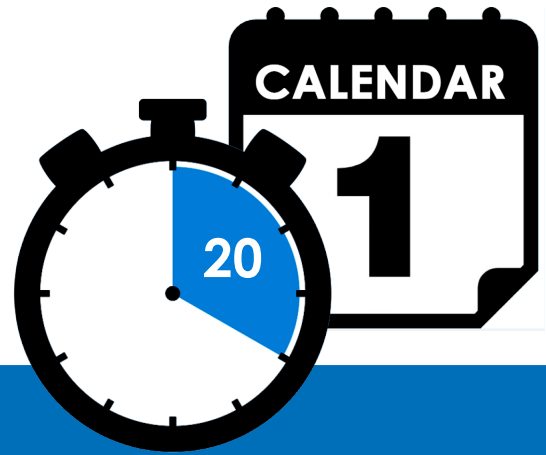
The Medicare Physician Fee Schedule under American Medical Association **CPT Code 99490** allows Medicare payment reimbursement for non-face-to-face care coordination services furnished to Medicare beneficiaries with multiple chronic conditions.

These Medicare billable, chronic care management services involve at least 20 minutes of clinical staff time per calendar month that is directed by a physician or other qualified health care professional.



QUESTIONS ABOUT THIS CPT CODE?

Get paid to move to a value-based payment model. Ask your GLPTN Quality Improvement Advisor (QIA) for details about CPT Code 99490 today.



CPT Code 99490 required elements:

- Multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient.
- Chronic conditions place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline.
- Comprehensive care plan established, implemented, revised or monitored.
- Only one (1) provider can bill for a patient/month.
- Signed consent before furnishing services.
- Eligible to bill: physicians; clinical nurse specialists; nurse practitioners; physician assistants; certified nurse midwives

Great Lakes Practice Transformation Network

* Lochner KA, Cox CS. Prevalence of Multiple Chronic Conditions Among Medicare Beneficiaries, United States, 2010. *Prev Chronic Dis* 2013;10:120137. DOI: <http://dx.doi.org/10.5888/pcd10.120137> External Web Site Icon.