Chronic Care Management

Increase Patient Satisfaction & Prepare for MIPS

Presented by
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Agenda

- What is Chronic Care Management (CCM)?
- Program Details
- Benefits for Physicians & Patients
- Why Renova?
- Questions & Answers

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Chronic Care Management

According to CMS

- 2/3 of Medicare patients have 2 or more chronic conditions.
- In 2015, Medicare introduced a chronic care management program to reimburse physicians who create a care plan for these patients

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Program Requirements

- The physician must utilize a currently **Certified EHR**
- The patient must have **2 or more chronic conditions**
- The physician must create a **Care Plan** for the qualified CCM patient *Reimbursable as of 2017, Code G0506
- The patient should **consent to participate** in the program *2017 the mandatory consent was removed
- **20 minutes of non-face-to-face patient care** under general supervision of a physician *2 additional Complex codes as of 2017

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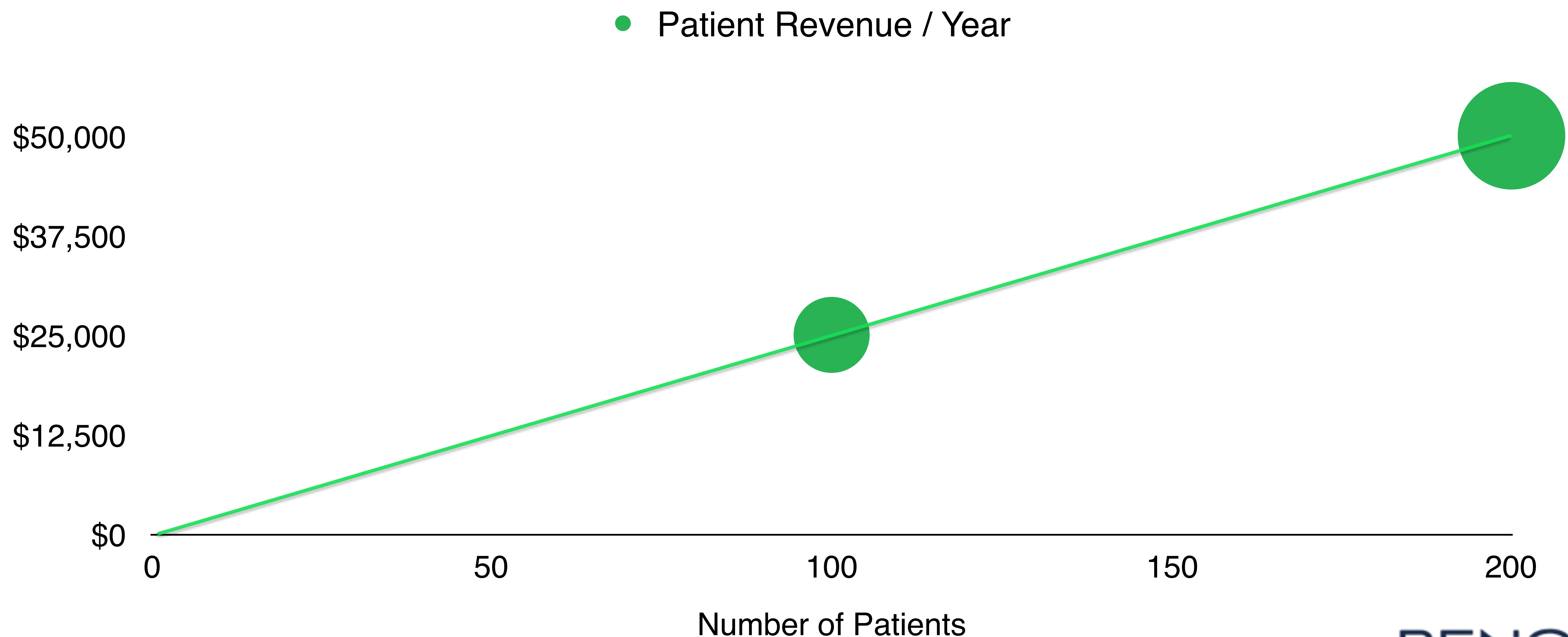
Revenue Opportunity

A practice with **200 Fee-for-Service Medicare patients** enrolled in the CCM program has the potential to increase revenue by up to $40,000 per year



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Patient Wellness

- Increase **patient satisfaction**
- Improve **patient compliance** with medications and care plan
- **Assist patients** with follow-up visits
- Identify additional **community resources** for patients
- Where appropriate, **communicate with patient's care giver**
- Help **reduce hospital admissions**

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Why Renova?

- **Patient**-centered
- **No up-front** physician out of pocket costs *EMR vendor fees may apply to export patient data
- **24/7 access for patients** - Extending your practice services without increasing costs
- **Complete Care Coordination** with your office
- **Removes the administrative burden** so your practice can efficiently provide CCM care to qualifying patients

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Monthly Non-Face to Face Care

Renova Patient Care Advocate (PCA) works as an extension of your medical practice to provide your patients **20 minutes of non-face-to-face care** each month

Renova PCA will perform a medication reconciliation and oversee the patient's self- management of medications

Renova PCA will ensure receipt of all recommended preventive services according to the physician Care Plan

Renova PCA will monitor the patient's condition -

- Physical
- Mental
- Social

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Better Prepared for MIPS

- The program shares many of the quality measures that are identified under MIPS.
- Patient enrollment in the program helps physicians prepare for MIPS reporting.
- The program promotes fee for value rather than fee for service.
- CMS recognized the need for the CCM program and made changes which apply this year.

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For a personalized meeting to learn more about implementing Chronic Care Management, contact

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