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2024 Issue Brief Promoting Access to Care for the Chronically III

Issue

Chronic care management (CCM) is a critical part of coordinated care. As a result, Medicare began reimbursing physicians for CCM under a separate billing code in the Medicare Physician Fee Schedule in 2015. This code is designed to reimburse providers for non-face-to-face care management. Providers and care managers have discovered several positive outcomes for CCM beneficiaries, including improved patient satisfaction and adherence to recommended therapies, improved clinician efficiency, and decreased hospitalizations and emergency department visits.ⁱ

However, the current guidelines from the U.S. Preventive Services Task Force do not classify CCM as a preventive service, leading to the Centers for Medicare & Medicaid Services (CMS) requiring beneficiaries to pay a 20% coinsurance for this care. This is a significant barrier because these services are primarily non-patient-facing, and patients don't understand why they're being billed for it. The latest data reveals that only 4% of Medicare beneficiaries potentially eligible for CCM received these services, amounting to 882,000 out of a potential pool of 22.5 million eligible CCM beneficiaries.ii By reclassifying CCM as a preventive service and eliminating the coinsurance requirement, we can potentially increase the utilization of this important service, benefiting a larger proportion of eligible CCM beneficiaries.

Reps. Suzan DelBene (D-WA) and Jeff Duncan (R-SC) have introduced legislation, the Chronic Care Management Improvement Act, which waives Medicare's CCM code coinsurance requirement. Eliminating the coinsurance payment for Medicare beneficiaries receiving CCM services would facilitate more comprehensive management of chronic care conditions and improve the health of Medicare patients.

AMGA asks Congress to:

Mandate that CMS waive the current CCM code coinsurance for Medicare beneficiaries to ensure appropriate use of CCM services, maximum access for patients, and improved health outcomes

• Approve H.R. 2829, the Chronic Care Management Improvement Act of 2023

ⁱ Schrurrer, et. al., *Evaluation of the Diffusion and Impact of the Chronic Care Management (CCM) Services: Final Report*, CMS, 2017, innovation.cms.gov/files/reports/chronic-care-mngmt-finalevalrpt.pdf ⁱⁱ Colligan, et. al., Analysis of 2019 Medicare Fee-for-Service (FFS) Claims for Chronic Care Management (CCM) and Transitional Care Management (TCM) Services, ASPE, 2022,

aspe.hhs.gov/sites/default/files/documents/31b7d0eeb7decf52f95d569ada0733b4/CCM-TCM-Descriptive-Analysis.pdf