

CCM UPDATE - May 2015

CCM MUST BE INITIATED BY THE BILLING PRACTITIONER DURING A COMPREHENSIVE EVALUATION & MANAGEMENT (E/M) VISIT, ANNUAL WELLNESS VISIT (AWV) OR INITIAL PREVENTIVE PHYSICAL EXAM (IPPE) - A CLARIFICATION FROM CMS - MAY 2015

In May 2015, CMS published a new Fact Sheet and FAQ.

CMS revised the [Medicare Learning Network® Fact Sheet on CCM services](#) (ICN 909188, released in March 2015) to clarify Medicare's requirement for 24/7 access by individuals furnishing CCM services to the electronic care plan rather than to the entire medical record. This is not a change but is a clarification.

CMS also released an extensive set of Frequently Asked Questions (FAQs) and answers.

One very important new clarification impacting most primary care providers relates to the question of whether or not an initial wellness visit is required rather than just "recommended" for each qualifying patient.

Discussed under a question about the physician's need to ever see the patient face-to-face, CMS finally made it clear that, YES, there must be a comprehensive evaluation of the patient that CMS will count as the initiating visit for CCM. This must be a face-to face encounter for a comprehensive evaluation/wellness visit/exam and must meet the following requirements:

- The provider must inform the patient during the visit about CCM, the scope of CCM services, and the necessity of informed patient consent.
- Patient consent does not have to be obtained during this visit.
- This encounter must occur prior to the initiation of billing for CCM services.
- The visit is billable under E/M and NOT CCM codes.
- If CCM is not discussed during this visit, it cannot count as the initiating visit for CCM.

Also discussed are many clarifications about billing CMS for CCM, CCM services and facilities. These topics will be discussed separately in future blogs and white papers.