

Care Management: Principal Care Management

6/14/2023

Today's Presenter

Provider Outreach and Education Consultants

- Carleen Parker
- Care Management Team
 - Carleen Parker
 - Christine Obergfell
 - Jennifer Lee
 - Lori Langevin
 - Michelle Coleman
 - Nathan Kennedy





Disclaimer

National Government Services, Inc. has produced this material as an informational reference for providers furnishing services in our contract jurisdiction. National Government Services employees, agents, and staff make no representation, warranty, or guarantee that this compilation of Medicare information is error-free and will bear no responsibility or liability for the results or consequences of the use of this material. Although every reasonable effort has been made to assure the accuracy of the information within these pages at the time of publication, the Medicare Program is constantly changing, and it is the responsibility of each provider to remain abreast of the Medicare Program requirements. Any regulations, policies and/or guidelines cited in this publication are subject to change without further notice. Current Medicare regulations can be found on the [CMS website](#).



Recording

Attendees/providers are never permitted to record (tape record or any other method) our educational events. This applies to webinars, teleconferences, live events and any other type of National Government Services educational events.

Objective

- Care Management: Making all-inclusive care plan a reality and by offering these sessions, we hope that our J6 and JK providers have a better understanding on codes available that describe PCM



Care Management Continued Series Agenda

Principal Care Management

General

Coding

Billing

Documentation

Resources

Care Management: Principal Care Management Services



PCM Versus CCM

- Specialty care practitioners often care for patients with a single high-risk disease and do not meet the criteria for reporting other types of care management services that require management of multiple conditions
 - PCM: Single high-risk disease
 - CCM: Multiple (two or more) chronic conditions

PCM General

Treatment of beneficiaries with single, serious, chronic condition

Diagnosis expected to last between three months, one year or until death of patient

- May have led to recent hospitalizations
- Places patient at significant risk of death, acute exacerbation, decompensation or functional decline

Establishing, implementing, revising, and monitoring care plan specific to single disease





PCM Physicians, NPP, Clinical Staff

- Who can bill Part B PCM?
- Physicians and certain nonphysician practitioners
 - MD and DO
 - Physician assistants
 - Clinical nurse specialist
 - Nurse practitioners
 - Certified nurse midwives
- Clinical staff members
 - Under the supervision of physician/NPP who is allowed by law, regulation, and facility policy to perform or assist in performance of specified professional service, but who does not have an individual PTAN

PCM Benefits

- Improving patient quality of life, medical status and avoiding costly decompensations in patient's health
- Integral part of primary care, resulting in better health outcomes for patients while reducing overall healthcare costs
- Stabilization of patient's chronic condition by providing comprehensive care plan for single high-risk condition
- Prevention new diagnosis arising
- Provider reimbursement opportunities

PCM Requirements

- Billing PCM codes requires practitioner to develop disease-specific care plan
 - Consent
 - Documents dates and times
 - Educate patient on PCM and cost sharing
 - List care medical problem
 - Medications (allergies)
 - Patient's demographics
 - Requires documentation to substantiate time and patient facts





PCM Billing Codes

Code	Description
99424	PCM services for a single high-risk disease first 30 minutes provided personally by a physician or other qualified health care professional , per calendar month
+99425	PCM services for a single high-risk disease each additional 30 minutes provided personally by a physician or other qualified health care professional , per calendar month. List separately in addition to primary
99426	PCM for a single high-risk disease first 30 minutes of clinical staff time directed by physician or other qualified health care professional , per calendar month
+99427	PCM services, for a single high-risk disease each additional 30 minutes of clinical staff time directed by a physician or other qualified health care professional , per calendar month. List separately in addition to primary

PCM and E/M Billing

- Goal is to manage condition
- May initiate at AWW or other billable E/M visit
- 24/7 access to dedicated care team member
- Condition unusually complex due to comorbidities
- Timed services managing patients with single complex chronic condition
 - 99424 and 99425: physician/NPP
 - 99426 and 99427: clinical staff
- Time accumulates throughout month
 - Once threshold met, claim may be submitted

Comprehensive Care Management for Single High-Risk Disease Elements

- Record patient's demographics, problems, medications, and allergies using certified Electronic Health Record (EHR) technology
 - Cognitive assessment
 - Develop problem list
 - Environmental evaluation
 - Expected outcome and prognosis
 - Frequent adjustments to medication
 - Measurable treatment goals
 - Medication symptom management
 - Planned interventions
 - Requirements for periodic review
 - Revision of care plan, when applicable



Principal Care Management: Resources

- [NGSMedicare.com > Education > Medicare Topics > Care Management > Principal Care Management](#)
- [Calendar Year \(CY\) 2022 Medicare Federal register](#)
- MLN Booklet®: [Chronic Care Management Services](#)

Questions?

Thank you! A follow-up email will be sent to attendees with the Medicare University Course Code.



medicare **mobile**

Text NEWS to 37702; Text GAMES to 37702



youtube.com/ngsmedicare