Introduction by: Idaho, Montana, Nevada, New Mexico, North Dakota, Wyoming

Subject: Chronic Care Management Payment for Patients Also on Home Health

Referred to: Reference Committee J
(Peter C. Amadio, MD, Chair)

Whereas, The Centers for Medicare and Medicaid Services (CMS) may reimburse physicians for Chronic Care Management (CCM) services to manage patients with two or more chronic conditions, meeting requirements outlined in Medicare regulations; and

Whereas, When patients are enrolled in home health episodes, physicians in Rural Health Clinics (RHCs) or Federally Qualified Health Centers (FQHCs) are unable to receive CCM reimbursement for treatment or supervision of a patient with chronic conditions under the CCM or home health supervision codes; and

Whereas, Most physicians can receive reimbursement for another service when providing home health supervision, except physicians in RHCs or FQHCs that are unable to receive reimbursement for home healthcare supervision code G0181 (Physician supervision of a patient receiving Medicare covered services provided by a participating home health agency requiring complex and multidisciplinary care modalities involving regular physician development and/or revision of care plans); and

Whereas, For RHCs or FQHCs to provide integrated healthcare as Patient-Centered Medical Homes (PCMH) and provide patients with better health and lower healthcare costs, allowing CCM reimbursement to patients in a current home health episode would align with CMS regulations for CCM; therefore be it

RESOLVED, That our American Medical Association advocate for the authorization of Chronic Care Management (CCM) reimbursement for Rural Health Clinics, Federally Qualified Health Centers, and all other physician clinics providing CCM for patients enrolled in a home health episode, to the Centers for Medicare and Medicaid Services and to Congress if federal law must be amended. (New HOD Policy)

Fiscal Note: Not yet determined

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