

Evaluation of the Diffusion and Impact of the Chronic Care Management Fees

Client: Centers for Medicare & Medicaid Services, Center for Medicare & Medicaid Innovation

Overview

In 2015, the Centers for Medicare & Medicaid Services (CMS) issued a new billing code to allow eligible professionals to be reimbursed for chronic care management (CCM) activities. The fee was designed to support primary care through financial investment in care management services. Under the program, eligible professionals can bill CMS and participating patients for coordination and care management activities conducted by telephone or online rather than in person. Eligible professionals are required to obtain patient consent and review the terms of participation, including copays, prior to billing for CCM services.

In partnership with Mathematica Policy Research, Insight evaluated the effects of CCM fees on primary care delivery with three primary goals:

- Assess the uptake and diffusion of CCM fees from January 2015 to December 2016.
- Explore provider and beneficiary experiences with CCM services and fees.
- Examine the impact of the introduction of CCM fees on existing payment reform models being tested by the Center for Medicare & Medicaid Innovation.

To support CMS's understanding of beneficiary experiences with CCM services, Insight conducted semistructured telephone interviews



with 48 Medicare beneficiaries for whom eligible professionals billed CCM fees. The interviews gathered information about beneficiaries' experiences of receiving CCM services, their reasons for agreeing to participate, and their intentions to continue or discontinue receiving the services. The interviews also explored beneficiaries' responses to the introduction of a copay for care management services and whether their decisions to participate were influenced by the cost of the copay or having secondary insurance to cover the copay.

Products

Semistructured patient interview protocol; advance letter for interview; transcripts for completed interviews; coding scheme; summary of findings and themes