



Problem List (Chart-wide)

Display: **All Statuses** ▾

Edit

Status	Problem	Problem Note	Onset	Resolved

Social History (Chart-wide) No Saved Notes

Edit

Medication History (Chart-wide) Last Modified N/A

Display: **All Statuses** ▾

Status	Medication	Instructions	Start	Stop

Mark as Reviewed

fineprintLbl

PCC eRx Allergies (Chart-wide) Last Modified N/A

Display: **All Statuses** ▾

Status	Allergen	Reaction	Severity	Sensitivity Type	Onset	Resolved

Mark as Reviewed

fineprintLbl

Visit Documents

HPI: location|timing|quality|severity|context|modify factors

Referral

Order select a referral ▾

Referral

Make All: **Yes** **No** **N/A**

Yes No N/A

Time Frame of Referral

notes ▾

Are notes necessary?

notes ▾

Any associated labs/radiology?

notes ▾

Any associated screens?

notes ▾

add item ▾





Transitional Care Management

Select All

- 1 face-to-face within 7 (99496 - high complexity only) or 14 (99495) calendar days of discharge



- 1 non-face-to-face - discharge instructions, labs, referrals, education



- Patient transitioning from facility to home



- Provider oversees management/Coordination



- Medication reconciliation has been completed during face-to-face (1111F)



- add item



Chronic/Complex Care Management

Select All

- Per Calendar Month (adding up the times)



- Patient with 2 or more complex chronic conditions lasting >12mos



- Provider coordinates or oversees management



- Complex CCM requires 60min of clinical staff time under physician supervision



- 99490 20+ min of clinical staff time --> 99439 each additional 20 min



- 99491 30-59 min physician time --> 99437 60-89 min



- 99487 Complex MDM with 60+ min of physician/staff time --> 99489 each additional 30min



notes

add item

notes

Principal Care Management

Select All

Monthly service

notes

Provider management/coordination not required

notes

Single complex chronic condition expected to last 3 mos with a care plan that is developed/revised/monitored and shared with patient

notes

99424 30+ min by physician --> 99425 each additional 30 min

notes

99426 30+ min of staff time --> 99427 each additional 30 min

notes

add item

notes

Care Plan Oversight

Select All

Per Calendar Month (adding up the times)

notes

Face-to-face within 6 mos of CPO services

notes

Provider supervising patient who is UNDER health care services (therapists, home health, hospice)

notes

Patient has at least 1 chronic condition

notes

99374 15-29 min, 99375 30+ min

notes



add item

notes

Prolonged Services

Select All

Non face-to-face before or after patient care

notes

Has to be on Service Date

notes

99358 30-74min + 99359 75-104 min (up to 2 times)

notes

add item

notes

General Behavioral Health Integration

Select All

Psychologist or Psychiatrist is integrated into the practice

notes

Clinical staff spending at least 20min in calendar month

notes

Time spent in contact with patient and psychologist to assess progress using standardized rating scales and coordinating care

notes

add item

notes

Medical Test

Order Chronic Care Management Provider

Order Chronic Care Management Staff

Order Principal Care Management Provider

Order Principal Care Management Staff

Order select a medical test



Time of visit/Records

Select All

Start Time

notes

End Time

notes

Time spent discussing with patient family/caregivers/other professionals/community services/agencies

notes

Referrals made (to insurance, to facility, special forms completed)

notes

Assessment and support for adherence to the care plan

notes

Medication reconciliation

notes

Identifying community and health resources

notes

Ongoing review of patient status including labs and other studies

notes

Facilitating other access to care

notes

Updating of Careplan

notes

add item

notes

Diagnoses

select diagnosis

notes

Care Plan (Chart-wide)

No Interventions

Print

Display: All Statuses

Edit

Care Coordination and Care Plan Management

**Followup**

Order	select a followup	▼
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Navigational Anchors in D2C Care-Coordination Non Face-Face Referral

1. Prescriptions
2. Visit Documents
3. HPI: location|timing|quality|severity|context|modify factors
4. Referrals
5. Referral
6. Transitional Care Management
7. Chronic/Complex Care Management
8. Principal Care Management
9. Care Plan Oversight
10. Prolonged Services
11. General Behavioral Health Integration
12. Counting Minutes per Month
13. Time Spent
14. Diagnoses