MyCare Program

THE GUIDE

01 Services Provided

Chronic Care Management (CCM) & Remote Patient Monitoring (RPM)

- **CCM**: Provides patients with a personal Care Coordinator who will regularly check in with them to provide health and lifestyle support and assistance with medication management and care coordination.
- **RPM**: Provides overweight and obese patients with a digital scale to capture and monitor weight data.

02 How Does It Work

CCM and RPM services are provided through MetaPhy's "MyCare Program"

- Patients engage through **remote communication** such as calls, emails, and texts.
- Monthly billing is based on **cumulative time logged** for all communication efforts (calls, voicemails, texts, emails) and other program-related care/support/services (chart reviews, call prep, post-call documentation, and other educational information provided to the patient).
    - Dates of Service (DOS) correspond to the last date of the month that any program-related task was logged. **DOS does NOT always correspond to the date of a phone call**.

03 MetaPhy & the Virtual Care Team (VCT)

- MetaPhy Health is headquartered in Brentwood, TN, just south of Nashville. VCT members work remotely on behalf of the practice, under the **general supervision** of the practice's provider(s).
    - **MyCare Coordinators:** LPNs, MAs, and RNs
    - **Additional VCT Resources:** PA, Dietitian, Exercise Physiologist, Patient Experience Team, and Quality Control Team
    - VCT is trained to follow any documented guidance listed in the patient's chart.
- MetaPhy has a Business Associate Agreement (BAA) with the practice, which allows VCT to access PHI securely. VCT follows the same HIPPA guidelines as the practice.

04 Enrollment Process

- **Provider Initiates**: MyCare Program flyer, standing order in EMR, referral via EMR task, MyCare Connect app, etc.
- **VCT Outreach**: A MyCare Coordinator will follow up with patients via letter, email, text or phone call. MetaPhy reviews appointment reports in the last 12 months to help identify patients who potentially qualify for the program.
- **Direct Enrollment**: Patients can call 844-714-1353

05 Patient Qualifications for the MyCare Program

- Medicare or Medicare Advantage plan as primary insurance
- DOS with practice provider within the last 12 months
    - This only applies to the initial qualifying visit. Medicare does not require patients to “re-qualify” for CCM each year.
- Must have 2+ chronic conditions

06 Provider Talking Points

- I’d like you to consider the benefits of participating in our MyCare Program to improve your overall health.
- You’ll be assigned a Care Coordinator who will check in with you regularly to provide health and lifestyle support and assistance with medication management, care coordination, and needed appointments.
- I will review your care plan every month so I can routinely monitor and help manage your health.
- Please expect a call from a Care Coordinator soon to tell you more about the program.

07 Billing Codes & Descriptions

CPT Code	Type	Description
99490	CCM	20 minutes of cumulative time
99439	CCM	Additional 20 minutes (use in conjunction with 99490, for 40- and 60-min encounters)
99453	RPM	Device set up
99454	RPM	Device data transmission (16+ readings per month minimum)
99457	RPM	20 minutes of cumulative monitoring time
99458	RPM	Additional 20 minutes of monitoring (use in conjunction with 99457, for 40-min encounters)

08 Billing Guidelines

- CMS guidelines for CCM services, such as CPT code 99490, require a certain amount of clinical staff time directed by a physician or other qualified healthcare professional per calendar month.
  - This cumulative time can include various remote activities in addition to the phone call with the patient, such as care coordination, patient education, review of medical records, documentation, and other related virtual services and communication.
  - Medicare does not require the MyCare Coordinator to speak directly with the patient every single month in order to bill for CCM services.

- **For more Billing FAQs, please visit our MyCare Program Resources page.**

09 Benefits to Your Patients

- **Your Own Personal Care Coordinator** - Monthly check-ins over the phone, as well as weekly texts and emails, which will provide:
  - Health and lifestyle support
  - Assistance with medication management
  - Assistance with coordination of doctor visits and appointment reminders
  - 24/7 emergency access
- **Comprehensive Care Plan**
  - Documentation of your health and lifestyle goals
  - More frequent communication and support in between office visits
  - Helpful resources and other educational information provided
  - Monthly review by your physician
- **Improved Quality of Life** (source)
  - Healthier lifestyle
  - Weight loss
  - Possible reduction in needed medications
- **Long-Term Cost Savings**
  - Avoid more costly ER visits, hospital admissions, and higher level, more expensive care associated with worsening/prolonged health issues.

10 Benefits to Your Practice (source)

- Improved patient satisfaction
- Improved patient compliance with provider recommendations
- Reduced patient hospitalizations and emergency visits, including additional resources needed to care for high-risk, high-need patients
- Improved clinician efficiency and reduced operational cost
- Increased physician revenue

11 Additional Practice Resources & Training

- For more information, including official CMS resources, program FAQs or other training resources, visit **Program Resources**.
- To order additional marketing materials, visit **Marketing Order Form**.

12 Contact Info for Patients

- Please have patients **call 844-714-1353** for the following:
  - New patients who are interested in learning more about the MyCare Program
  - Already enrolled patients who need to reach their MyCare Coordinator
  - Billing questions or concerns