

## RESOLUTION

Subject: Advocacy for All Health Plans to Provide Chronic Care Management Services Without Co-pay For Their Insured Patients

Submitted by: Greater Louisville Medical Society

Referred to: Reference Committee

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WHEREAS, 6 in 10 adults in the United States have a chronic disease and 4 in 10 adults have two or more chronic diseases. Chronic conditions are the leading cause of death and disability and are responsible for 90% of the nation's \$3.8 trillion in annual healthcare expenditures<sup>1</sup>; and

WHEREAS, in effort to reduce healthcare cost and improve patient outcomes, in 2015 CMS began the Chronic Care Management (CCM) program. CCM are for eligible patients with 2 or more chronic conditions; must last at least 12 months or until death; and that place the patients at significant risk of death, acute exacerbation/decompensation, or functional decline; and

WHEREAS, CCM are non-face-to-face-services provided by clinical staff under the direction of eligible healthcare clinicians, per calendar month. Services can include: an electronic, centered care plan tracking; education; preventative services; medication management and reconciliation; transitional care management; coordination of home/community based clinical service; and

WHEREAS, the effectiveness of the CCM program saves Medicare approximately \$74 per patient, per month;<sup>3</sup> reduces unnecessary hospital visits by 4.7%, ED visits by 2.3%<sup>4</sup>, and manages health problems with an extra level of care. In turn, patients are healthier, more connected, and save on healthcare costs annually, healthcare practitioners feel supported; and

WHEREAS, practices and vendors who provide CCM face an enormous hurdle due to the monthly required patient co-pay that it has been harder to enroll patients and therefore not beneficial for healthcare systems to implement and costly to our patients. Also, CCM services are only covered by select insurance companies; now, therefore, be it

RESOLVED, that the KMA advocate to the Kentucky Department of Insurance for all health plans to provide Chronic Care Management services without co-pay for their insured patients.

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**References:**

- <sup>1</sup> <https://www.cdc.gov/chronicdisease/about/index.htm#:~:text=Chronic%20diseases%20are%20defined%20broadly,disability%20in%20the%20United%20States.>
- <sup>2</sup> <https://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnproducts/downloads/chroniccaremanagement.pdf>
- <sup>3</sup> Administration of Community Living. May 31, 2017. Developing the Business Case for Outsourcing Care Management to a Community Based Organization (CBO). Retrieved from [https://www.acl.gov/sites/default/files/programs/2017-12/TIM%20TALKS\\_Business%20Planning\\_Care%20Management\\_May%2031\\_2017.pdf](https://www.acl.gov/sites/default/files/programs/2017-12/TIM%20TALKS_Business%20Planning_Care%20Management_May%2031_2017.pdf)
- <sup>4</sup> Mathematic Policy Research. November 2, 2017. Evaluation of the Diffusion and Impact of Chronic Care Management (CCM) Services: Final Report. Retrieved from <https://innovation.cms.gov/Files/reports/chronic-care-mngmt-finalevalrpt.pdf>