

## Medicare Chronic Care Management (CCM) Consent



Patient Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Medicare ID: \_\_\_\_\_

### What is Chronic Care Management (CCM)?

You have two or more chronic conditions expected to last at least 12 months (or until death) that place you at risk of worsening health, hospitalization, or functional decline.

Chronic Care Management services include:

- \* Personalized care plan creation and monitoring
- \* Medication management and reconciliation
- \* Coordination with specialists, hospitals, home health, and other providers
- \* 24/7 access to care management services
- \* At least 20 minutes per month of non-face-to-face care management services

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### Important Information

- \* Only one provider can bill Medicare for CCM services each month.
- \* These services are provided outside of regular office visits.
- \* You may stop CCM services at any time (effective at the end of the calendar month).
- \* Medicare will apply usual Part B cost-sharing (copay/deductible may apply).
- \* You will receive a comprehensive care plan.

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### Patient Authorization

I understand the information above and:

- Agree to receive Chronic Care Management services
- Understand that only one provider may bill for CCM each month
- Understand I may withdraw consent at any time
- Authorize electronic communication of my medical information as needed for care coordination

Patient/Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

If signed by representative:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_