

Chronic Care Management			
99490	*2 or more chronic conditions expected to last at least 12 months or until the death of the patient *Significant risk of death, acute exacerbation/decompensation, or functional decline *Comprehensive care plan established, implemented, revised, or monitored	Clinical staff directed by MD or QHP	Do not report if less than 20 mins in a calendar month. Bill 20 min increments beginning at minute 20. Report only once per calendar month.
99439	99490 Add-On	Clinical staff directed by MD or QHP	(99490 Add-On) ...each additional 20 minutes in a calendar month. Report only twice per calendar month.
99491	*2 or more chronic conditions expected to last at least 12 months or until the death of the patient *Significant risk of death, acute exacerbation/decompensation, or functional decline *Comprehensive care plan established, implemented, revise, or monitored	Provided personally by MD or QHP	If less than 30 mins in a calendar month time may be combined w/99490 minutes. Bill 30 min increments beginning at minute 30. Report only once per calendar month.
99437	99491 Add-On	Provided personally by MD or QHP	(99491 Add-On) ...each additional 30 minutes in a calendar month.
Complex Chronic Care Management			
99487	*2 or more chronic conditions expected to last at least 12 months or until the death of the patient *Significant risk of death, acute exacerbation/decompensation, or functional decline *Comprehensive care plan established, implemented, revise, or monitored *Moderate or high complexity MDM	Clinical staff directed by MD or QHP	Do not report if less than 60 mins in a calendar month. Bill 60 min beginning at minute 60. Report only once per calendar month.
99489	99487 Add-On	Clinical staff directed by MD or QHP	(99487 Add-On) ...each additional 30 minutes in a calendar month.
Principal Care Management			
99424	*One complex chronic condition expected to last at least 3 months *High-risk disease *Places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, *Condition requires **development, monitoring, or revision of disease-specific care plan **frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities **ongoing communication and care coordination between relevant practitioners furnishing care	Provided personally by MD or QHP	Do not report if less than 30 mins in a calendar month. Bill 30 min beginning at minute 30. Report only once per calendar month.
99425	99424 Add-On	Provided personally by MD or QHP	(99424 Add-On) ...each additional 30 minutes in a calendar month.
99426	*One complex chronic condition expected to last at least 3 months *High-risk disease *Places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, *Condition requires **development, monitoring, or revision of disease-specific care plan **frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities **ongoing communication and care coordination between relevant practitioners furnishing care	Clinical staff directed by MD or QHP	If less than 30 mins in a calendar month time may be combined w/99490 minutes. Bill 30 min increments beginning at minute 30. Report only once per calendar month.
99427	99426 Add-On	Clinical staff directed by MD or QHP	(99426 Add-On) ...each additional 30 minutes in a calendar month.
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