Annual Wellness Visit	Chronic Care Management	Principal Care Management	Behavioral Health Integration	Transitional Care Management	Remote Patient Monitoring
IPPE: • Newly enrolled Medicare Part B beneficiaries • One-time code G0402 • Face-to-face visit • Within first 12 months of enrollment **Initial AWV:** • After IPPE or 12 months after enrollment • One-time code G0438 **Subsequent AWVs:** • Every 12 months after IPPE or Initial AWV • Code GO439 can be used for every AWV henceforth	• 2 or more chronic conditions expected to last at least 12 months or until death, or put patient at significant risk of death, acute exacerbation, decompensation, or functional decline • Can use criteria for eligibility, including # of illnesses, # of medications, repeat admissions, repeat ED visits • Initiating visit required for new patients and those not seen in 1 year • Initiating visit can be IPPE or AWV • Document advance consent given in written or verbal form • Provide information on cost-sharing	• 1 chronic condition expected to last at least 3 months or until death, or puts patient at significant risk of death, acute exacerbation, decompensation, or functional decline • Can use criteria for eligibility, including # of illnesses, # of medications, repeat admissions, repeat ED visits • Initiating visit required for new patients and those not seen in 1 year • Initiating visit can be IPPE or AWV • Document advance consent given in written or verbal form • Provide information on cost-sharing	• Diagnosed with any mental, behavioral, psychological or substance use disorder condition • May have comorbid, chronic, or other conditions, but not required • Initiating visit required for new patients and those not seen in 1 year • Assessment before starting BH service • Document advance consent given in written or verbal form • Provide information on cost-sharing • Educate that patient can stop any time effective the end of the calendar month	• Patient is currently inpatient or just discharged • Discharged back to community setting like home, domiciliary, nursing or assisted living facility • Communication must occur within 2 business days of discharge by direct, telephone or electronic means to patient or caregiver • One face-to-face visit must occur within 7 days of discharge	• Only established patient through Evaluation and Management (E/M) or similar service • Allowed for patients with both chronic and acute conditions • Patients can be living at home or in a community setting

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