

## Chronic Care Management (CCM) Comprehensive Care Plan Template

The CCM Comprehensive Care Plan Template is designed to assist qualified healthcare professionals with proper documentation of the CCM services provided to their patients. Ensure that your electronic health record (EHR) system includes the following data elements listed in this document. Make the electronic version of this care plan available within and outside the billing practice to individuals involved in the patient’s care. Provide patients and/or caregivers with a copy of the care plan.

Care Plan Initiation Date: \_\_\_\_\_ or Date of Revision: \_\_\_\_\_

**Patient Information**

<b>Name</b>	
<b>Date of birth</b>	
<b>Primary care physician</b>	

**Complete Problem List (You can elaborate on page 3.)**

<b>Chronic health conditions</b>	
<b>Surgeries</b>	
<b>Tests/Procedures</b>	

**Current Medications (List scheduled/PRN\*/complementary or alternative medications.)**

<b>Medication</b>	<b>Dose</b>	<b>Frequency</b>

\*PRN = as needed

Preventive Care (Enter dates.)	Annual Wellness Visit	
<b>Vaccination</b>		
Flu:		
COVID-19:		
<b>Allergies</b>		

Chronic Condition #1—Goals and Interventions	
<b>Chronic condition #1</b>	
<b>Prognosis</b>	
<b>Symptom management (Include any educational resources provided.)</b>	
<b>Measurable treatment goals</b>	
<b>Planned interventions</b>	
<b>Coordination of care</b>	

Chronic Condition #2—Goals and Interventions	
<b>Chronic condition #2</b>	
<b>Prognosis</b>	
<b>Symptom management (Include any educational resources provided.)</b>	
<b>Measurable treatment goals</b>	
<b>Planned interventions</b>	
<b>Coordination of care</b>	

Chronic Condition #3—Goals and Interventions	
Chronic condition #3	
Prognosis	
Symptom management (Include any educational resources provided.)	
Measurable treatment goals	
Planned interventions	
Coordination of care	

Medication list reviewed:  Yes  No

Medication reconciliation last completed date: \_\_\_\_\_

Care plan reviewed and shared with patient:  Yes  No

Care plan reviewed and shared date: \_\_\_\_\_

Care Management Follow-up Activities	
Activity/task description	Time spent (in minutes)