

FACTSHEET

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Improving HOPE for Alzheimer's Act

What is CPT® billing code 99483?

- The bipartisan HOPE for Alzheimer's Act from the 114th Congress would have created a care planning benefit for Medicare beneficiaries with Alzheimer's and other dementias.
- By 2016, more than two-thirds of Congress supported the bill. There were 310 cosponsors in the House of Representatives and 57 in the Senate.
- Since January 1, 2017, the Centers for Medicare and Medicaid Services (CMS)—through CPT® billing code 99483—allows clinicians to be reimbursed for providing a comprehensive set of care planning services to cognitively impaired individuals and their caregivers.

Why is care planning necessary?

- Care planning allows diagnosed individuals and their caregivers to learn about medical and non-medical treatments, clinical trials, and support services available in the community.
- Individuals receiving dementia-specific care planning have fewer hospitalizations, fewer emergency room visits, and better medication management.
- Alzheimer's and related dementias complicate the management of other chronic conditions. Care planning is key to care coordination and managing those other conditions.

How many have received the care planning benefit?

- In 2017, fewer than 1% of seniors living with Alzheimer's disease received the care planning benefit.
- This low rate of usage shows that while care planning results in a higher quality of care and life, patients and providers are generally not aware of the existence of the benefit.
- However, over the course of the year, as more people became aware of the benefit, the utilization of the care planning code increased.

What would the Improving HOPE for Alzheimer's Act (S. 880 / H.R. 1873) do?

- The Improving HOPE for Alzheimer's Act builds on the care planning benefit by addressing the low usage of the benefit.
- The legislation includes provisions of the original HOPE for Alzheimer's Act not implemented by CMS when it created the new billing code.
- Specifically, the Improving HOPE for Alzheimer's Act would require HHS to:
 - Educate clinicians on care planning services available under Medicare and on the care planning billing code.
 - Report on the barriers to individuals receiving care planning services and how the rate of usage can be increased.