Care Management Program	Documentation Requirements	Service Providers	Face-to-Face E/M Required?	Supervision Level	Billing Codes	Time Requirements	Exclusion Codes / Restrictions	Other Notes
Principle Illness Navigation (**PIN**)	Annual consent (verbal or written), care plan	CHWs, social workers, nurses, navigators, physicians, and APP's	Yes, initiating visit required	General	G0023 (monthly), G0024 (initiation)	G0023 ≥60 min/month G0024 ≥30 min/month (add on for additional 30 min increments).	Cannot bill with CCM, PCM, or Complex CCM in same month	Must be tied to serious chronic illness (≥3 months)
Principal Care Management (**PCM**)	Annual consent (verbal or written), care plan, coordination	Physicians, QHCPs, clinical staff	Yes, initiating visit required	Direct (for clinical staff)	99424–99427	≥30 min/month	Cannot bill with CCM or other care management codes in same month	Focused on one serious condition
Transitional Care Management (**TCM**)	Discharge date, contact within 2 days, face-to-face visit	Physicians, NPs, PAs, CNSs, CNMs	Yes, within 7 or 14 days	General	99495, 99496	30-day window	Cannot bill discharge day management separately; only one TCM per 30 days	Includes medication reconciliation
Community Health Integration (**CHI**)	Annual consent (verbal or written), community-based care plan, coordination documentation	CHWs, social workers, community health workers, physicians, and APP's.	Yes, initiating visit required	General	G0019 (monthly), G0022 (add-on)	G0019 ≥60 min/month G0022 ≥30 min/month (add on for additional 30 min increments).	Cannot bill with PIN, PCM, CCM in same month	Focus on addressing social and community barriers
Remote Therapeutic Monitoring (**RTM**)	consent, orders documented, Device setup, data collection,	Physicians, QHCPs, therapists	No	General or direct	98975–98981	98980 ≥20 min/month 98981 ≥20 min/month (add on for additional 20 min increments).	Cannot bill RTM and RPM for same data; only one device code per condition/month	Focus on non-physiological data