ChronicCareIQ
GROW WITH CONFIDENCE

Care management made easy — for you, *and* for your patients

Leverage the work you are already doing – and the systems and staff you already have – to optimize your clinical, financial, and operational outcomes:

Maximize Reimbursements
Track more than 25 codes monthly, generating recurring reimbursements for work that's already performed in your EHR and on the phone.

Improve Patient Outcomes
Because a lot happens between office visits, the ChronicCareIQ platform alerts staff about which patients have needs — meaning they can focus on who needs help the most. That has a significant impact on reducing hospital readmissions.

Gain Visibility
You can't manage what you can't measure. Simplify managing clinical and operational resources with real-time patient dashboards and pre-built financial reports.

Increase Staff Productivity
ChronicCareIQ makes complex patients easier to care for by reducing inbound phone calls, slowing or halting disease progression, and preventing hospitalizations.

Enhance Patient Experience & Retention
Enhance patient engagement, retention, and relationships by automating and simplifying communication through the technologies that they already use.

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by the numbers

$162M+
REIMBURSEMENTS GENERATED FOR CARE MANAGEMENT ACTIVITIES

87%
YEAR-OVER-YEAR PATIENT RETENTION

209,900+
PATIENTS ENROLLED

29.4%
REDUCTION IN ALL-CAUSE HOSPITALIZATIONS

350,000
PREVENTED HOSPITALIZATIONS

1.6M+
HOURS OF STAFF ACTIVITIES DOCUMENTED FOR BILLING

*Attribution for all data points: ChronicCareIQ, Q4 2024

"ChronicCareIQ has become an indispensable ally in our mission. The platform's impact on patient outcomes, from reducing hospital admissions to enhancing communications and achieving financial success, has exceeded our expectations."

Dr. Jim Carmical
Woodside Medical, Arkansas

You can depend on ChronicCareIQ for

Chronic Care Management
Alert your staff so they can focus on getting the right care to the right patient at the right time.

Remote Patient Monitoring
Capture device-based vital signs and self-reported subjective data to help slow disease progression.

Principal Care Management
Get real-time updates on at-risk patients and auto-capture reimbursable activities.

Advanced Primary Care Management Services
APCM codes simplify via bundling the billing for Principal Care Management, Transitional Care Management, and Chronic Care Management services. APCM provides a flat fee per primary care patient per month with no need to track time.

Transitional Care Management
Prevent gaps in care when your team is informed about patients transitioning between care settings.

Behavioral Health/ Care Coordination
Improve patient outcomes and maximize reimbursement for care coordination between primary care providers and behavioral health professionals.

Remote Therapeutic Monitoring
RTM codes include non-physiologic data monitoring for areas including respiratory system status, musculoskeletal system status, medication response, medication adherence, and pain levels.

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