



What to Expect

How the program works step by step

- Enrollment and consent.
- Creation of your individualized care plan.
- Monthly contact with your care team
- Ongoing updates shared with your primary provider.
- Typical communication methods phone, patient portal.

Your Role as a Patient

- Encouragement to stay engaged and share updates on your symptoms, medications, or concerns.
- Your active participation helps your care team better support you.

Frequently Asked Questions



Will this cost me anything?

- ONLY for CCM services, there will be NO cost to qualifying patients.

How often will I be contacted?

- The patient will be contacted monthly but can always call the CEC with CCM-related questions.

Can I stop the program if I choose to?

- Patients can enroll or disenroll at ANY time.

How is my information kept private?

- We remain HIPAA- compliant. All patient data is safe-housed in our EMR; Athena.



**SCAN FOR HOURS &
LOCATIONS**

**We can be reached 24/7. For
after hours assistance, please
call (732) 363-6655**

SCAN ME



*"You're not alone in managing
your chronic conditions—your
care team is here to support you
every step of the way."*



Managing Your Health with Chronic Care Management

*"Personalized
support for your
ongoing health
needs"*



Ocean Health Initiatives, Inc.

www.OHINJ.org

What Is Chronic Care Management (CCM)?

Chronic Care Management is a healthcare service designed to support people who live with **two or more ongoing health conditions**—things like diabetes, high blood pressure, asthma, COPD, heart disease, chronic pain, or obesity. Instead of only checking in when something goes wrong, CCM gives patients **regular, proactive support** to help them stay healthier day-to-day. It's about managing conditions before they become emergencies.



Why Is Chronic Care Management (CCM) Important?

Chronic Care Management (CCM) is important because it provides the ongoing support patients need between office visits. With monthly check-ins, medication guidance, and personalized care coordination, CCM helps individuals with long-term conditions stay on track and avoid complications. By catching issues early and reducing emergency visits, CCM improves overall health, stability, and quality of life. It's a proactive, patient-focused approach that helps people feel supported and connected to their care every step of the way.



- Personalized care plan tailored to your needs.
- Monthly check-ins from a nurse or care coordinator.
- Better communication between you and your healthcare team.
- Easier medication management and appointment scheduling
- Support for your health goals and lifestyle changes.

