

ACCESS

Personalized support for chronic health conditions,
covered by Medicare



Medicare now offers ACCESS, personalized support for chronic health conditions



ACCESS care options are:

- Provided by organizations that are approved by Medicare
- Available at low or no cost to beneficiaries
- Designed to give beneficiaries personalized chronic care support from the comfort of their home

ACCESS support is designed to help beneficiaries improve their health and complement the care they already get from their existing doctors and other providers.

What's covered?

ACCESS care organizations can offer a variety of tools and ways to get personalized support, like:

- Virtual visits
- Lifestyle coaching, including nutrition and exercise
- Connected and/or wearable devices
- Apps
- Medication management
- Behavioral health support

How does ACCESS work with beneficiaries' existing providers?



- ACCESS adds complementary support for managing a chronic condition—it doesn't replace beneficiaries' existing health care providers.
- Primary care providers and other clinicians can help beneficiaries connect with an ACCESS organization (although a referral isn't required) and can bill for co-management.
- ACCESS organizations must share care plans and updates with existing providers and support electronic exchange of health information.

Who can sign up?

Anyone with Original Medicare who has one or more of these conditions:

- High blood pressure
- Obesity
- Diabetes
- Heart disease (atherosclerotic cardiovascular disease)
- Anxiety
- High cholesterol (dyslipidemia)
- Prediabetes
- Chronic kidney disease
- Depression
- Ongoing muscle or joint pain

Beginning Spring 2027, ACCESS will include support for substance use disorders (including alcohol and opioid use disorders), heart failure, chronic obstructive pulmonary disease, and tobacco cessation. Three out of four people with Medicare qualify for at least one ACCESS track.

If beneficiaries have more than one condition, they may be able to work with multiple care organizations.



Who can sign up?

If beneficiaries have a Medicare Advantage Plan (Part C) they can't use this care option, but their plan may offer something similar. Beneficiaries should contact their plan to find out what's available.

What will beneficiaries pay?

Most organizations charge between \$0-\$7/month

- If a single organization is helping with multiple conditions, they can't charge more than \$13/month total.
- As part of beneficiaries' care, a vendor may give or loan medical equipment related to the beneficiaries' condition (like a blood pressure monitor or continuous glucose monitor). They may need to return the items later, but they won't have to pay to use them.

Example: Lisa has Original Medicare and anxiety, so she can sign up with a care organization and use their app to help her manage her anxiety. She'll pay that organization \$3/month. If she has diabetes she can sign up with either the same organization or a different one, and pay them \$7/month to support her in managing her diabetes.

How do beneficiaries sign up?

Medicare.gov

Find ACCESS organizations

Medicare offers ACCESS, a care option that supports people with Original Medicare who have one or more chronic health conditions. This care option is:

- Provided by organizations that are approved by Medicare
- Available at low or no cost to you
- Designed to give you personalized chronic care support from the comfort of your home

Want to know more about ACCESS, like who can sign up, what it costs, and what's covered?

[Find out more](#)



Search organizations

Condition

Pick condition(s)



Location

Pick location



Provider name (optional)

Search

- Visit Medicare.gov/ACCESS to find participating organizations.
- Once they find an organization they'd like to get support from, they'll contact them directly to sign up. Beneficiaries can sign up with a care organization directly, without a referral.
- Beneficiaries can also ask their doctor, pharmacist, or other health care provider to help.

How do beneficiaries sign up?

ACCESS organization search results

Condition: High blood pressure Location: Alabama Provider name (optional): [Search](#)

Filter by: [Cost](#) [Clear Filter](#)

ACCESS Care Organization A

Conditions served: High blood pressure [+ 3 more](#)

Areas served: Alabama [+ 50 more](#)

What you pay: \$0/month

Ongoing support for chronic conditions, including health monitoring, lifestyle support, and coordination with your care team.

[Visit Website](#)

ACCESS Care Organization B

Conditions served: High blood pressure [+ 6 more](#)

Areas served: Alabama [+ 50 more](#)

What you pay: \$0/month

A health app for diabetes, hypertension, & obesity. Get real-time coaching on meds, diet, activity, & labs. Build health habits to fit your lifestyle.

[Visit Website](#)

ACCESS Care Organization C

- Visit Medicare.gov/ACCESS to find participating organizations.
- Once they find an organization they'd like to get support from, they'll contact them directly to sign up. Beneficiaries can sign up with a care organization directly, without a referral.
- Beneficiaries can also ask their doctor, pharmacist, or other health care provider to help.

What happens after beneficiaries sign up?

1. The care organization will confirm eligibility and get the beneficiary started with the care and services they offer.
2. They'll share the beneficiary's care plan with their primary care provider or specialists (when possible), to ensure care is coordinated.
3. The beneficiary will start getting care and support that's personalized for the condition(s) they need help managing.

Care is available on an ongoing basis for most conditions, but beneficiaries don't have to keep using this care option. They can cancel or switch organizations after their first 90 days.

Signing up for this care option is part of beneficiaries' Medicare benefits. They don't lose any coverage and can still go to any provider that accepts Medicare and get any other covered services they're eligible for.

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For more information visit [Medicare.gov/ACCESS](https://www.Medicare.gov/ACCESS)

