

HEDIS® Tip Sheet

Transitions of Care (TRC)

Measure Description

The percentage of discharges for members 18 years of age and older who had each of the following. Four rates are reported:

1. **Notification of Inpatient Admission.** Documentation of receipt of notification and inpatient admission on the day of admission through two (2) days after the admission (3 total days).
2. **Receipt of Discharge Information.** Documentation of receipt of discharge information on the day of discharge through two (2) days after the discharge (3 total days).
3. **Patient Engagement After Inpatient Discharge.** Documentation of member engagement (e.g., office visits, visits to the home, telehealth) provided within 30 days after discharge.
4. **Medication Reconciliation Post-Discharge.** Documentation of medication reconciliation on the date of discharge through 30 days after discharge (31 total days).

Please note the following:

- Notification of Inpatient Admission & Receipt of Discharge Information are measures only reported during HEDIS season, on a sample of the entire population, whereas Patient Engagement After Inpatient Discharge and Medication Reconciliation Post Discharge can be reported throughout the year.
- When an ED visit results in an inpatient admission, notification that a provider sent the member to the ED does not meet criteria. Evidence that the PCP or ongoing care provider communicated with the ED about the admission meets criteria.
- The Medicare Star Ratings measure is the average of the individually reported rates for Medication Reconciliation Post Discharge, Notification of Inpatient Admission, Patient Engagement After Inpatient Discharge, and Receipt of Discharge Information.

Product Line: Medicare

★ Medicare Star Measure Weight: 1

Measure Specification: Administrative and Hybrid

Codes Included in the Current HEDIS® Measure

Description	Code
Outpatient and Telehealth	CPT: 98966-98968, 98970-98972, 98980, 98981, 99202-99205, 99211-99215, 99242-99245, 99341-99342, 99344-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99421-99423, 99429, 99441-99443, 99455-99458, 99483 HCPCS: G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2250-G2252, T1015 UBREV: 0510, 0511, 0513-0517, 0519-0523, 0526-0529, 0982, 0983
Transitional Care Management Services	CPT: 99495, 99496
Medication Reconciliation Encounter	CPT: 99483, 99495, 99496
Medication Reconciliation Intervention	CPT II: 1111F (Do not include codes with CPT CAT II Modifier: 1P-3P, 8P)

Ways Providers can Improve HEDIS® Performance

- Schedule telehealth visits to provide patient engagement after inpatient discharge.
- Monitor ADT notifications and ensure that they are promptly documented in the outpatient medical record, see specific measure timelines below.
- Update post discharge follow-up documentation template to include “discharge medications reconciled with the current medication list in outpatient medical record.”
- Keep in mind that TRC is an event-based measure that patients can be in multiple times for each admission/discharge. Medical records or appropriate CPT II coding needs to be provided showing medication reconciliation for each discharge date.
- Utilize CPT Category II code 1111F (discharge medications reconciled with the current medication list in outpatient medical record) and receive \$10.
- **Admission documentation requirements:**
 - Documentation must include evidence of receipt of notification of inpatient admission on the day of admission through two days after the admission (3 total days), with a date/time stamp. Example: phone call, email, fax.
- **Discharge documentation requirements:**
 - Documentation of receipt of discharge information on the day of discharge through 2 days after the discharge (3 total days) with evidence of the date when discharge documentation was received.
- **Discharge follow-up requirements:**
 - An outpatient visit, such as office visits and home visits, telephone visit, telehealth visit must occur within 30 days *after* discharge. A visit completed on the date of discharge will not meet compliance for member engagement.
- **Medication reconciliation requirements:**
 - A prescribing practitioner, clinical pharmacist or registered nurse must conduct medication reconciliation, on the date of discharge through 30 days after discharge (total of 31 days). Note: a medication reconciliation performed without the patient present meets criteria.
- The provider can upload medical records that contain medical record documentation (e.g., progress notes) in Availity HEDIS Portlet, Cozeva, fax, etc. to close a data gap if the patient has a medical record on file

Ways Health Plans can Improve HEDIS® Performance

- Educate providers on the requirements for admission and discharge documentation, medication reconciliation, and discharge follow-up requirements
- Request discharge summary from the inpatient facility when discharge ADT notification is received
- Contact patients immediately following discharge to conduct medication reconciliation (e.g., over the phone if possible) and to schedule an appointment.
- Utilize EMR to access discharge summaries for medication reconciliation
- Audit, identify, and educate top 10 providers with needed documentation

Required Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who die any time during the measurement year.



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