

Transitional Care Management With Medication Reconciliation Post-Discharge

Complete to meet quality care standards and promote better health outcomes.



UnitedHealthcare encourages you to help address open care opportunities for your patients who are Medicare Advantage plan members so you can meet performance goals and receive payment for your efforts. When you provide transitional care management (TCM) services for your patients, you can:

- Complete the important Healthcare Effectiveness Data and Information Set (HEDIS®) medication reconciliation post-discharge (MRP) measure.
- Help prevent a health condition from getting worse and resulting in a hospital readmission.
- Meet Centers for Medicare & Medicaid Services (CMS) reimbursement guidelines.

Defining TCM and MRP

TCM is the follow-up services you provide to your patients after they've been discharged from a hospital stay to help prevent readmission. TCM outreach to your patients must happen within certain time periods.

The HEDIS measure for MRP is an essential part of TCM. It requires you to review the medication your patient was prescribed at the hospital and compare it against what they were taking prior to admission. The review must take place **within 30 days** of discharge. Medication reconciliation can help:

- Address medication errors or duplications.
- Educate your patients on their new medications and side effects.
- Lower the risk for adverse interactions.

Managing the TCM and MRP care opportunities

To start addressing TCM and MRP, first identify which UnitedHealthcare Medicare Advantage plan members were recently discharged from a hospital and/or have an open care opportunity. You can do this through:

- Your normal process
- The Census Dashboard in UHCTransitions™ (Health BI) at uhc.healthcollaborate.com
- Your monthly Patient Care Opportunity Report (PCOR)

If you need help accessing UHCTransitions or your PCOR, please contact your UnitedHealthcare representative.

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Next, consider what level of TCM services your patient needs. CMS has assigned two CPT® codes for TCM. The primary difference between the codes is the level of medical decision making involved – moderate complexity or high complexity. CMS offers this useful chart to help you understand the different levels.

Type of decision making	Number of possible diagnoses and/or management options	Amount and/or complexity of data to be reviewed	Risk of significant complications, morbidity and/or mortality	TCM billable activity
Straightforward	Minimal	Minimal or none	Minimal	No
Low complexity	Limited	Limited	Low	No
Moderate complexity	Multiple	Moderate	Moderate	Yes
High complexity	Extensive	Extensive	High	Yes

Both CPT codes generally have these same requirements to meet the CMS TCM guidelines – the exception is how soon you need to see your patient after discharge:

- 1** Contact your patient and/or their caregiver **within two business days** after being discharged from the hospital to make sure they understand their treatment plan and medication instructions. If you're unable to reach your patient after two or more attempts, you may report this as complete so long as you document your outreach and meet all other requirements.
- 2** See your patient **within seven days** of discharge for cases requiring high complexity decision making, or **within 14 days** of discharge for those needing moderate complexity decision making.
- 3** **Within 30 days of discharge**, perform necessary follow-up with your patient. For example:

 - Connect them with appropriate community and health resources.
 - Educate your patient about independent living.
 - Reconcile their medications – **addresses the MRP HEDIS measure.**
 - Remind them about when to use walk-in or urgent care, as appropriate.
 - Review pending lab tests and treatments, and schedule additional services, preventive care and follow-up care as needed.
 - Talk with caregivers or the home health agencies caring for them.

All requirements must be met within 30 days after discharge to be reimbursed for TCM. If your patient is readmitted to the hospital within those 30 days, you can't bill for the TCM services you performed. The TCM requirement timelines will start over with the new discharge date, and you can complete the requirements within 30 days and be reimbursed if your patient isn't readmitted again.

Submitting the required data

We appreciate your help in making sure data for TCM and MRP is submitted correctly and in a timely manner. Completion rates are determined through:

- **Administrative data.** To be reimbursed for TCM services with moderate complexity decision making, please submit using CPT code **99495**. Services with high complexity decision making must be submitted with CPT code **99496**.

MRP can be submitted with CPT Category II code **1111F**. There is no reimbursement for this code, but it closes an important HEDIS measure that can help you meet your performance goals and potentially earn a reward if you're participating in a UnitedHealthcare incentive program.

- **Medical record documentation.** For TCM, documentation in a plan member's medical record must include the following information:

- Date your patient was discharged from the hospital
- Date you saw your patient
- Date you made contact with your patient and/or their caregiver
- Level of medical decision making complexity — high or moderate

For the MRP HEDIS measure, medical record documentation must include:

- Date medication reconciliation was performed
- Notation stating that current medication and discharge medication lists were reviewed
- Signature of prescribing care provider, clinical pharmacist or registered nurse who performed medication reconciliation
- If medications were provided at discharge, please include your patient's next steps such as:
 - Take new medications as prescribed.
 - Discontinue all discharge medications.
- Notation if no medications were prescribed at discharge

Contact us to learn more. For more information about how our programs can help support your patients who are UnitedHealthcare Medicare Advantage plan members, please contact your UnitedHealthcare representative. Thank you.

