

Transitions of Care Best Practices: Frequently Asked Questions

HOW DOES SELECT HEALTH MEASURE TRANSITIONS OF CARE?

Select Health uses a National Committee for Quality Assurance (NCQA) measure to monitor how often transition of care best practices occur. These best practices include:

- Medication reconciliation
- Notification of inpatient admission
- Receipt of discharge information
- Patient engagement

In 2022, all elements of this program became part of the Stars measurement set.

WHAT ARE BEST PRACTICES FOR MEDICATION RECONCILIATION (CURRENT STARS MEASURE)?

Medications should be reconciled within **30 days** of discharge.

At minimum, the chart should include reference to the inpatient stay, a current medication list, and a notation that reconciliation occurred.

CPT II code 1111F can be reported to Select Health on a claim to administratively report the medication reconciliation. This can also be set up in an EHR to be 'billed' automatically.

Note that reporting received administratively on claims may reduce the burden of annual chart review.

WHAT ARE BEST PRACTICES FOR NOTIFICATION OF INPATIENT ADMISSION?

The primary care provider (PCP) should receive notification that their patient was admitted to a facility on the day of admission but **no later than two days** after admission.

The notification can be by phone, email, fax, or alert, but documentation must:

- Appear In the outpatient chart
- Include a received date in an accessible place

WHAT ARE BEST PRACTICES FOR RECEIPT OF DISCHARGE INFORMATION?

The PCP should receive the following discharge information on the day of discharge but **no later than two days after**:

- The practitioner responsible for the member's care during the inpatient stay (usually the attending MD)
- Procedures or treatment provided
- Diagnoses at discharge
- Discharge medication list
- Test results or documentation that there are no pending tests
- Instructions to the PCP for post-discharge care (e.g., medication changes, home health orders, pending or follow-up lab work)

Record this information in the outpatient chart and ensure that a received date has been documented in an accessible place.

WHAT IS BEST PRACTICE FOR FOLLOW-UP PATIENT ENGAGEMENT?

No later than 30 days following discharge, the patient should have at least one follow-up visit in the office, at home, or via telehealth, or they should have a phone call with a provider or other representative from the clinic.

