Medication Reconciliation
Post-Discharge (MRP)

Q: Which members are included in the sample?
A: Members 18 years and older who had an acute or non-acute inpatient discharge on or between 01/01/2016 and 12/01/2016, and for whom medications were reconciled the date of discharge through 30 days after discharge (31 total days).

Q: What codes are used?
A: Please reference attached sample codes and Value Set Directory for additional codes.

Q: What documentation is needed in the medical record?
A: Documentation in the medical record must include evidence of medication reconciliation and the date when it was performed. Any of the following meets criteria:

- Documentation that the provider reconciled the current and discharge medications
- Documentation of the current medications with a notation that references the discharge medications (e.g., no changes in medications since discharge, same medications at discharge, discontinue all discharge medications)
- Documentation of the member’s current medications with a notation that the discharge medications were reviewed
- Documentation of a current medication list, a discharge medication list and notation that both lists were reviewed on the same date of service
- Evidence that the member was seen for post-discharge hospital follow-up with evidence of medication reconciliation or review
- Documentation in the discharge summary that the discharge medications were reconciled with the current medication. There must be evidence that the discharge summary was filed in the outpatient chart on the date of discharge through 30 days after discharge (31 total days).
- Notation that no medications were prescribed or ordered upon discharge

Q: What type of medical record is acceptable?
A:
- A medication list in a discharge summary that is present in the outpatient chart
- Hospital Discharge Summary
- Progress notes with the member’s current medication list and a notation of reconciliation of discharge medications with the current medications

Q: How to improve score for this HEDIS measure?
A:
- Use of complete and accurate Value Set Codes
- Timely submission of claims and encounter data
- Ensure proper documentation of medication reconciliation and the date when it was performed
SAMPLE CODES
The codes listed below are not inclusive and do not represent a complete list of codes found in the NCQA HEDIS® Value Set. To ensure accurate documentation, please refer to the HEDIS® 2017 Value Set Directory located on the L.A. Care Website at:

http://www.lacare.org/providers/provider-resources/hedis-resources

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