Transitions of Care Measure Overview

November 14-15, 2018
Washington, DC
HEDIS Transitions of Care

Measure Description

The percentage of discharges for members 18 years of age and older who had each of the following:

- Notification of Inpatient Admission
- Receipt of Discharge Information
- Patient Engagement After Inpatient Discharge
- Medication Reconciliation

Three rates reported for each indicator:

- 18-64 years of age
- 65 and older
- Total Rate
Notification of Inpatient Admission

**Indicator Description**

Documentation of notification of inpatient admission on the day of admission or the following day in the medical record of the primary care practitioner (PCP) or ongoing care provider. Examples include:

- Communication between inpatient staff and PCP staff
- Communication from plan
- Indication that PCP was involved in admission

Plans must review sample of medical records to assess numerator compliance.
Receipt of Discharge Information

Indicator Description

Documentation of receipt of discharge information on the day of discharge or the following day was found in the medical record of the PCP or ongoing care provider. Required information:

- Inpatient practitioner
- Procedures and treatments
- Diagnoses at discharge
- Medication list
- Testing results, including tests pending or no tests
- Instructions to PCP for patient care
Patient Engagement After Inpatient Discharge

Indicator Description

Patient engagement (e.g., office visits, visits to the home, telehealth) within 30 days after discharge was found in the PCP or ongoing care medical record.

Plans may use administrative codes for their full population of eligible discharges and review sample of medical records to assess numerator compliance.
Medication Reconciliation Post-Discharge

**Indicator Description**

Documentation of medication reconciliation on the date of discharge through 30 days after discharge was found in the medical record of the PCP or ongoing care provider.

- Conducted by a prescribing practitioner, clinical pharmacist or registered nurse

Plans may use administrative codes for their full population of eligible discharges and review sample of medical records to assess numerator compliance.
Discussion