TRANSITIONAL CARE M A N A G E M E N T





A majority of Post-Discharge visits are billed incorrectly! TCM pays up to \$245 vs. OV at \$68

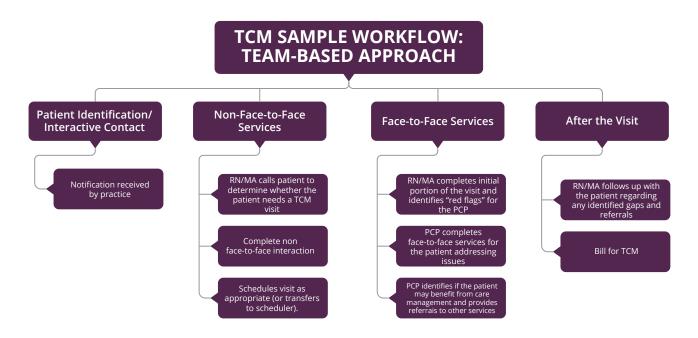
With 100 discharges, you could be missing \$17,700 is revenue annually!

WHAT IS TRANSITIONAL CARE MANAGEMENT?

Transitional care management (TCM) includes services provided to a patient during transition from an inpatient stay back to their homes. TCMs are a key driver in ensuring successful patient outcomes and reducing readmissions back to the inpatient facility – These visits are of high-value to patients, and a direct revenue driver to your office. <u>ACO Goal: 60% TCM visits completed during the performance year!</u>

TCM services involve a transition of care from one of the following community settings:

- Inpatient acute care hospital
- Inpatient psychiatric hospital
- Long-term care hospital
- Skilled nursing facility
- Inpatient rehabilitation facility
- Hospital outpatient observation or partial hospitalization
- Partial hospitalization at a community mental health center



MEDICAL DECISION MAKING

- The level of Medical Decision Making is determined by the following factors:
 - The number of possible diagnoses.
 - The amount and/or complexity or medical records, diagnostic tests, etc. that must be obtained, reviewed, and analyzed.
 - The risk of significant complications, morbidity, and/or mortality.

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
Straightforward	Minimal	Minimal or None	Minimal
Low Complexity	Limited	Limited	Low
Moderate Complexity	Multiple	Moderate	Moderate
High Complexity	Extensive	Extensive	High

BILLING & DOCUMENTATION

- ▶ If the patient is readmitted in the 30-day period, can TCM still be reported? No, TCM services can NOT be reported if the patient has been readmitted within the 30-day post-discharge period for the same condition. If the practitioner bills TCM before the readmission, a billing correct must be completed by resubmitting for an E/M visit instead of a TCM visit. The practitioner can complete a TCM visit for the readmission as long as patient does NOT get readmitted within the 30-day post-discharge period. CPT guidance for TCM services states that only one individual may report TCM services and only once per patient within 30 days of discharge.
- CCM and TCM codes may now be concurrently billed.
- The same health care professional may discharge the patient from the hospital and bill TCM services. However, the face-to-face visit may not occur the same day as discharge.
- Report other reasonable and necessary evaluation and management (E/M) services separately.
- At a minimum, the following information must be documented:
 - Patient discharge date
 - Patient or caregiver first interactive contact date
 - Face-to-face visit date
 - Medical complexity decision making (moderate or high)

