

Population: Patients 66 and older enrolled in a Medicare Advantage Plan

Measurement Range: Measurement year

Required Codes: Must code CPT & CPT II for both medication review and medication list.

<p>Medication Review: At least one medication review conducted by the prescribing provider or a clinical pharmacist and the presence of a medication list in the medical record, or a notation that the patient is not taking any medications.</p> <p><i>Does not require patient to be present.</i></p>	<p>CPT: 90863 PharmacoLogic management performed with psychotherapy services.</p> <p>99483: Cognitive Assessment & Care Plan Services</p> <p>99495: Transitional care management (TCM) services moderate complexity within 14 days of discharge</p> <p>99496: TCM services high complexity within seven days of discharge</p>	<p>CPT II 1159F Medication list documented in record</p> <p>1160F Review of medication by a prescribing practitioner or clinical pharmacist documented in medical record</p> <p>HCPCS: G8427</p>
<p>Pain Assessment</p>		<p>CPT II: 1125F Quantified pain present 1126F No pain present</p>

Required Exclusion Codes: Medication Review: G9687

Outreach Logic: Included in birthday cards and pre-appointment outreach for patients that have not had a medication review in the calendar year.