

Measure: Care of Older Adults

Population: Patients >66 enrolled in a Medicare Advantage Plan or Medicare-Medicaid Plan (MMP)

Measurement Range: Measurement year

Required Codes: Must report CPT & CPT II codes 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. Does not require patient to be present.</p>	<p>CPT: 90863 PharmacoLogic management performed with psychotherapy services. 99483: Cognitive Assessment & Care Plan Services 99605 Med management by pharmacist (new patient) / 99606: est. patient 99495: Transitional care management (TCM) services moderate complexity within 14 days of discharge 99496: TCM services high complexity within seven days of discharge</p>	<p>CPT II 1159F Medication list documented in record 1160F Review of medication by a prescribing practitioner or clinical pharmacist documented in medical record HCPCS: G8427</p>
<p>Pain Assessment Documentation in the medical record of at least one pain screening assessment for more than one system.</p>		<p>CPT II: 1125F Quantified pain present 1126F No pain</p>
<p>Functional Assessment Documentation in the medical record of at least one completed functional status assessment.</p>	<p>CPT: 99483: Cognitive Assessment & Care Plan Services</p>	<p>1170F HCPCS: G0438 G0439</p>

Exclusions: Patients 66 years old and older who are also enrolled in a Special Needs Plan (SNP), hospice or death in measurement year.