HEDIS® Measure – Medication Reconciliation Post-Discharge Guidelines

Medication Reconciliation Post-Discharge is one category included in the Blue Cross and Blue Shield of Illinois (BCBSIL) Quality Improvement (QI) program for the Blue Cross Community MMAI (Medicare-Medicaid Plan)SM product. The BCBSIL QI program is based on the view that the process for the delivery of medical care and services can be continuously improved.

Medication Reconciliation involves members age 18 and older who had documentation in their medical record that the provider, clinical pharmacist or registered nurse reconciled the member’s current medications with the medications they were receiving upon discharge from an acute or nonacute inpatient stay. The reconciliation must occur within 30 days of the hospitalization.

Only documentation of medication reconciliation in the outpatient medical record meets the requirement of the measure. The note in the medical record must include the date reconciliation was performed and one of the following:

- The provider reconciled the current medications with the discharge medications.
- Notation of the current medications that references the discharge medications, such as:
  - No changes in medications since discharge.
  - Same medications at discharge.
  - Discontinue all discharge medications.
- A record of the member’s current medications with a notation that the discharge medications were reviewed.
- The record contains a list of the member’s current medications, a discharge medication list and a notation that both lists were reviewed on the same date of service.
- An office visit stating the member was seen in follow-up post-hospital discharge with evidence that medication reconciliation occurred.
- A discharge summary that states the discharge medications were reconciled with the current medications. The discharge summary must be filed in the outpatient chart within 30 days of the discharge.
- A notation that no medications were prescribed or ordered upon discharge.

Once reconciliation of the medication lists has occurred, the correct Current Procedural Terminology (CPT®) codes can be used to show this reconciliation was performed. This measure can be captured through claims data, so it is important for providers to use the correct CPT codes when billing for services.

The BCBSIL Medicaid QI Department strives to ensure that members have access to quality care that is in alignment with nationally recognized practice and treatment standards. The QI team includes registered nurses in the State of Illinois, with many years of clinical, quality improvement and management experience.

The information mentioned here is for informational purposes only and is not a substitute for the independent medical judgment of a health care provider. Physicians and other health care providers are to use their own best medical judgment based upon all available information and the condition of the patient in determining the best course of treatment.

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