

# Transitional Care Management:

## Getting Paid for What We Do Best!

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AMERICAN ACADEMY OF  
FAMILY PHYSICIANS

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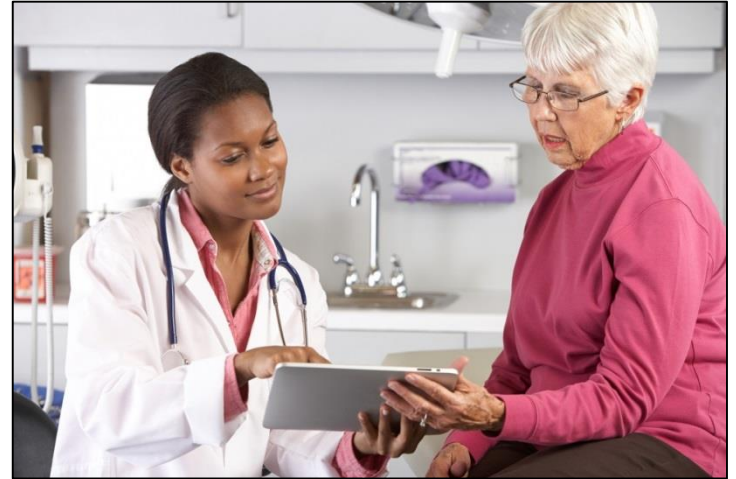
Marc D. Price, D.O. is a board-certified Family Physician and is the owner of a progressive small group practice, Family Medicine of Malta, in Malta, N.Y. He has been active with the New York State Academy of Family Physicians (NYSAFP) and AAFP since 2000 and is the current NYSAFP President-Elect and Delegate to the AAFP after having serving various other state academy roles such as Vice President, Treasurer, Alternate Delegate to the AAFP and Advocacy Commission Chair. He has served as the chair of the AAFP Commission for Government Advocacy and is currently serving on the AAFP Commission on Quality and Practice. Dr. Price has obtained the title of Assistant Clinical Professor through Albany Medical College and enjoys promoting the practice of family medicine to students of all levels, residents, other healthcare professionals and his community. In his free time he enjoys spending time with family and friends, riding his motorcycle, cooking and slow and low barbecue.

# Learning Objectives

1. Review CMS Transitional Care Management (TCM) requirements and summarize visit elements.
2. Identify how TCM can engage patients.
3. Assess financial and quality implications of TCM.
4. Recognize the importance of TCM in relation to value-based payment.

# What is Transitional Care Management (TCM)?

Payable service provided to Medicare beneficiaries during transitions in care from a hospital or other health care facility to a community setting

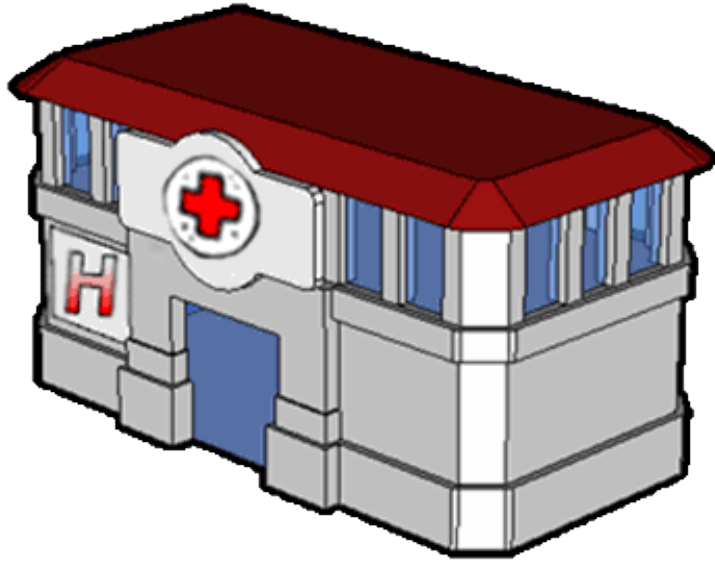


# TCM Requirements



- 1. What are the TCM service settings?**
- 2. Who can provide this service?**
- 3. What are the components necessary to bill this service?**

# What are the service settings?



1. Inpatient acute care hospital
2. Inpatient psychiatric hospital
3. Long term care hospital
4. Skilled nursing facility,
5. Inpatient rehabilitation
6. Hospital outpatient observation
7. Partial hospitalization

# Who can bill this service?



- Physicians
- Certified nurse midwives (CNMs)
- Clinical nurse specialist (CNS)
- Nurse practitioners (NPs)
- Physician assistants (Pas)



# Components necessary to bill TCM



Interactive Contact with the beneficiary or caregiver within 2 business days following a discharge

# Components necessary to bill TCM (cont.)



- Obtain and review discharge information
- Review need for and or follow up on pending test/treatments
- Education of the beneficiary, family member or caregiver
- Establish or re-establish with community providers and services
- Assist in scheduling follow up visits with providers and services

# Components necessary to bill TCM (cont.)



Face-to-face visit must be furnished within certain timeframes (7 or 14 days)

# Medical Decision Making



## Moderate Complexity (99495)

- Multiple number of diagnosis or management options
- Complexity of data to be reviewed is considered moderate
- Risk of significant complications, morbidity or mortality is considered moderate

# Medical Decision Making



## High Complexity (99496)

- Extensive number of diagnoses or management options
- Complexity of data to be reviewed is considered extensive
- Risk of significant complications, morbidity or mortality is considered extensive

# How Do We Get Paid?

Procedure codes:

99495 or 99496



Medical Decision Complexity

Face to Face Visit Requirements



Bill at 31 days

**S  
T  
E  
P  
S** *on our  
Journey*

# Implementing TCM in a small practice



- Identify a practice champion
- Roles and responsibilities of staff



# Implementing TCM in a small practice cont.



Identify Medicare beneficiaries and the acute care hospitals that discharge the majority of patients

# Identify readmission risk



Start with the patients with the highest risk of readmission

# Face to Face Visit



- CPT 99495
- CPT 99496

# Documentation requirement to bill TCM



- Date the beneficiary was discharged
- Date you made the interactive contact with beneficiary and or caregiver
- Date you furnished the face-to-face visit
- Complexity of medical decision making

# Benefits of TCM



- Impact on patient satisfaction
- Financial and quality indicators

# TCM and Value Based Payment



TCM provides reimbursement for the time and effort you and your care team invest in population health management

# Questions



# Resources

<http://www.aafp.org/practice-management/payment/coding/tcm.html>

<https://nf.aafp.org/shop/practice-management-tools/transitional-care-management-toolkit>

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Transitional-Care-Management-Services-Fact-Sheet-ICN908628.pdf>

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