DELIVERING VIRTUAL TCM's TO PATIENTS

This document outlines the tasks required to deliver a compliant virtual TCM during the COVID-19 period.

Regular TCM	Virtual TCM	Comments
Transitional Care Management Team		
Staff# calls patient within **2 business days of discharge***	SAME	
Staff# schedules office visit within 7 days based on moderate or high complexity	Schedule *virtual visit* within 7 or 14 days based on moderate or high complexity	Staff should inform patient of the virtual visit, and that they will receive a call from nurse/MA to do intake prior to scheduled appointment with the provider
Rooming Patient: All tasks completed by Medical Assistant (MA)		
Record Patient vitals measured (Height, Weight, BP, pulse, pain)	No Vitals taken. Only pain scale noted.	During COVID-19 outbreak, vitals do not need to be reported
Documentation (pharmacy, allergies, problem list, medications, vaccines, social history, family history, HRA)	SAME	MA will document vaccines, but not tee up orders or administer vaccines during COVID-19 period
Medication Review	SAME	Pull over meds needed for refill
Provider Visit: All tasks completed by PCP		
Post Discharge Medication Reconciliation (Quality Measure)	SAME	Provider asks patients to "show me your medicines."
Assess and evaluate patient	SAME	
Provide Patient Instructions and Action Plan	SAME	
Submit orders	SAME	
Submit coding for billing	SAME + add telehealth code	Telehealth code may vary for each EMR/market
Logistical Differences		
IN-PERSON TCM Visit	*VIRTUAL TCM*	
Patient checks in at front desk	Patient is checked in virtually before virtual visit	
Patient is roomed by MA in office	Patient is roomed by MA via telephone (intake process)	
Patient signs HIPAA forms at check-in	MA documents patient verbal consent for ensuing virtual visit with provider	
Patient is seen by PCP in office	Patient is seen by PCP virtually using virtual visit platform	
Patient leaves office with Written Action Plan and medications list	Encounter summary is pushed via portal or mailed to patient after the virtual visit	

***Required for CMS compliance** | #*Staff may vary depending on practice workflow (CM, practice staff, etc.,)*

For a TCM to be billed, the following must be documented in the medical record:
1. Date the patient was discharged
2. Date of the interactive contact with the patient and/or caregiver (within 48 hours); Attempts to communicate should continue after the first two attempts in the required 2 business days of discharge until successful.
3. Date of the face-to-face office visit *(automatically recorded by EMR when encounter is time and date stamped)*
4. The complexity of medical decision making: Moderate (99495); High (99496)

ALL GUIDELINES WILL BE REVISITED AFTER COVID-19 HEALTH EMERGENCY