



# Transitional Care Management 30-Day Worksheet

Patient name: \_\_\_\_\_ DOB: \_\_\_\_\_

D/C physician: \_\_\_\_\_ D/C date: \_\_\_\_\_

Records requested:

Records received:

Reviewed:

| Diagnoses on discharge:  |  |
|--|--|
| Date of interactive contact (2 business days post D/C):                            | <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Direct <input type="checkbox"/> Other |
| Date of 7-day or 14-day, face-to-face visit:                                       |  |
| Family and/or caretaker present at visit:  |  |
| Medications on discharge   | Medication changes/adjustments   |
|  |  |
| Diagnostic tests reviewed/disposition:   |  |
| Disease/illness education:   |  |
| Home health/community services discussion/referrals:                               |  |
| Establishment or re-establishment of referral orders for community resources:      |  |
| Discussion with other health care providers:                                       |  |
| Assessment and support of treatment regimen adherence:                             |  |
| Appointments coordinated with:   |  |
| Education for self-management, independent living, and activities of daily living: |  |

TCM, January 2019

**SUBMIT BILLING 30 DAYS POST DISCHARGE.**

Physician completes colored areas  
Staff completes remainder

| Medical Decision Making   |                        |   |     |          |       |
|---|------------------------|---|-----|----------|-------|
| DIAGNOSIS and MANAGEMENT  |                        |   | QTY | POINTS   | TOTAL |
| Self-limited or minor — stable, improv, or prog as expected   |                        |   |     | 1        | =     |
| Established prob — stable, improving  |                        |   |     | 1        | =     |
| Established prob — worsening  |                        |   |     | 2        | =     |
| New prob — no further workup planned  |                        |   |     | 3        | =     |
| New prob — additional workup planned  |                        |   |     | 4        | =     |
| DIAGNOSIS and MANAGEMENT TOTALS   |                        |   |     |          | =     |
| DATA REVIEWED   |                        |   |     |          |       |
| Review/order of clinical lab tests (80000 code series)  |                        |   |     |          | 1     |
| Review/order of radiology tests (70000 code series)   |                        |   |     |          | 1     |
| Review/order of medicine tests (90000 code series)  |                        |   |     |          | 1     |
| Discuss test w/performing or interpreting physician   |                        |   |     |          | 1     |
| <b>Decision</b> to obtain old records or history from someone other than patient  |                        |   |     |          | 1     |
| Review and summary of old records and/or <b>obtaining</b> history from someone other than pt and/or discussion w/another provider <b>with documentation of findings</b> |                        |   |     |          | 2     |
| Independent visualization of actual image, tracing, or specimen ( <b>not simply review of report</b> )  |                        |   |     |          | 2     |
| DATA REVIEWED TOTAL   |                        |   |     |          |       |
| TABLE OF RISK   |                        |   |     |          |       |
| Moderate  | Presenting Problem     | 1+ chronic ill w/milk exac, prog, or tx side effects, 2+ stable chronic ill, Undx new prob with uncertain prog (lump in breast), Acute ill w/systemic symp (pyelophritis, Pneumonitis, colitis), Acute comp injury (head inj w/brief loss of consciousness) |     |          |       |
|   | Diag Procedure Ordered | Physiologic tests under stress, Diag endos w/no identified risk, Deep needle or inc bx, Cardio imag w/cont, no identified risk, Obtain fluid from body cavity (lumbar puncture, thoracentesis)  |     |          |       |
|   | Mgmt Options           | Minor sx w identified risk, Elec major sx (open, perc, endos) w/no identified risk, Rx drug mgmt, Therapeutic nuclear medicine, IV fluids w/additives, Closed treatment of fx or dislocation w/o manipulation   |     |          |       |
| High  | Presenting Problem     | 1+ chr ill w/severe exac, prog, tx side effects; Acute/chr ill or inj posing threat to life/bodily func (trauma, MI, pulm emb, sev resp dist, prog sev rheum arth, psych ill w/pot threat to self or others, renal fail); Sz, TIA, weakness, sens loss      |     |          |       |
|   | Diag Procedure Ordered | Cardio img w/cont and risk; Cardio electrophysiological tests; Diag endoscopies w/identified risk factors; Discography  |     |          |       |
|   | Mgmt Options           | Elective major sx (open, perc, endo w/risk); Emerg major sx; Parenteral cont subs; Rx therapy w/intensive monitoring for toxicity; Decision not to resuscitate or to de-escalate care because of poor prognosis   |     |          |       |
| <b>(2 of 3 elements must be met or exceeded for a level of decision making)</b>   |                        |   |     |          |       |
| MDM:  |                        | SF  | Low | Mod      | High  |
| DX MGMT Options   |                        | 0-1   | 2   | 3        | 4+    |
| Data  |                        | 0-1   | 2   | 3        | 4+    |
| Risk  |                        | Minimal   | Low | Moderate | High  |
| <div>Physician signature: _____</div> <div>Staff signature: _____</div> <div>Staff signature: _____</div> <div>Staff signature: _____</div>                             |                        |   |     |          |       |
| <div>Physician completes colored areas</div> <div>Staff completes remainder</div>   |                        |   |     |          |       |

TCM.January 2013