Care for Older Adults (COA)

Lines of Business Affected: ● Medicare

The Care for Older Adult Measure looks at the percentage of adult age 66 years and older who had each of the following during the measurement year:

1. Medication Review
2. Functional Status Assessment
3. Pain Assessment

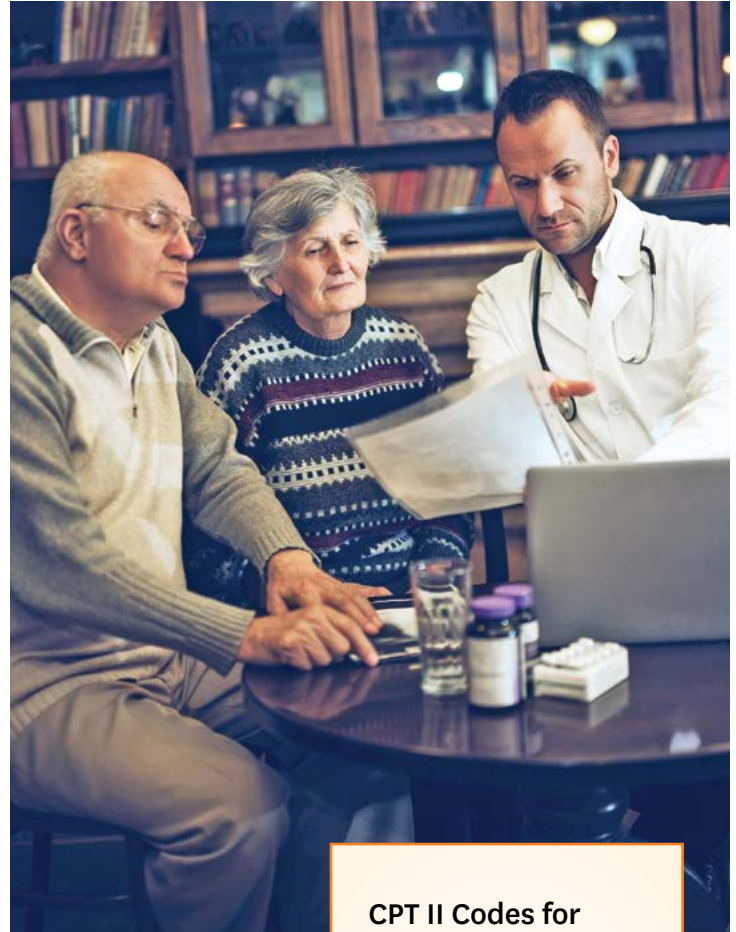Measurement year is from January 1 to December 31

Acceptable Documentation for Medication Review:

1. Medication List and documented the medications are reviewed by an acceptable provider type.
2. Name and credentials of the provider must be documented in the medical record. A signature of the provider is not required.
3. Medication List may contain the medication name only, dosage and frequency are not required.
4. Medication review may be completed in the ER setting.

Unacceptable Documentation for Medication Review:

1. Medication review may not be completed in an acute inpatient setting.
2. Medication list from an MDS form.
3. Review of side effects for a single medication at the time it was prescribed.
4. A Nurse (RN or LPN) is not an acceptable provider type.
5. Medications listed with patient's diagnosis and or treatment plan alone are not acceptable.

CPT II Codes for COA: 1159F, 1160F, 1111F, 1170F, 1125F, 1126F

HCPCS Code for COA: G8427

Acceptable Documentation for Functional Status Assessment:

1. Independent with ADLs/IADLs.

2. If documented separately, 5 ADLs or 4 IADLs must be included.

3. ER setting is acceptable if the visit is not limited to an acute or single condition, event, or body system.

4. Physical Therapy or Occupational Therapy is acceptable if the visit is not limited to an acute or single condition, event, or body system.

5. FSA from Home Health OASIS (Outcome and Assessment Information Set) forms, skilled nursing facilities, and case management records.

6. A Minimum Data Set from a nursing home.

7. Services rendered during a telephone visit, e-visit, or virtual check-in.

8. FSA standard tool dated in the measurement year with a result.

9. Grooming meets criteria for the Bathing ADL.

Unacceptable Documentation for Functional Status Assessment:

1. Less than 5 ADLs are documented in the MY when listed separately.

2. Less than 4 IADLs are documented in the MY when listed separately.

3. FSA that is limited to an acute or single condition or body system (e.g., knee, back, neck).

4. FSA may not be performed in an acute patient setting.

5. Documentation that "Functional Status has not changed."

6. CCD or CCDA documents are not acceptable.

7. FSA tool that does not include a result or score.

8. "Functional Status Assessed – 1170F" alone does not meet criteria for an FSA.

Acceptable Documentation for Pain Assessment:

1. Pain Assessment documentation may be Negative or Positive.

2. Acute or Chronic Pain

3. May relate to the reason for the visit.

4. May be an acute or single condition, event, or body system.

5. Burning, cramping, spams, tingling, sciatica, pressure.

6. Migraine, myalgia, arthralgia, neuralgia, toothache.

7. Tenderness, non-tender, discomfort, dysuria, claudication, headache.

8. Services rendered during telephone visit, e-visit, or virtual check-in.

Unacceptable Documentation for Pain Assessment:

1. Pain Assessment may not be performed in an acute inpatient setting.
2. Pain management plan alone is not acceptable.
3. Pain treatment plan alone is not acceptable.
4. Chest pain or screening for chest pain.
5. Chest tender.
6. CCD or CCDA documents are not acceptable.

Tips and Best Practices to Close the Care for Older Adults Care Gap:

1. Functional Status Assessment and Pain Assessments do not require a specific setting. Services rendered during a telephone visit, e-visit, or virtual check-in meet criteria.
2. Complete a Medication Review, functional status assessment, and pain assessment in the same visit if applicable.
3. Ensure the medical record contains a medication list or documentation the member is not taking any medications.
4. Always assist the members in scheduling their next appointment.

If you need help locating a health care provider or feel that your patient could benefit from Care Management Services, please call to speak with our staff.

Contact Provider Partnership:

HomeStateHealth.com	Home State: 1-855-694-4663 / TTY: 711
HomeStateHealth.com	Show Me Healthy Kids: 1-877-236-1020 / TTY: 711
Ambetter.HomeStateHealth.com	Ambetter: 1-855-650-3789 TTY: 1-877-250-6113
Wellcare.com	Wellcare: MAPD 1-833-444-9088 / D-SNP: 1-833-444-9089 / TTY: 711
Wellcare.com/en/Missouri	Wellcare By Allwell: MAPD 1-855-766-1452 / D-SNP: 1-833-298-3361 / TTY:711