



## **Transitions of Care-Notification of Inpatient Admission Tip Sheet**

### **What is the CMS Star Rating Program?**

CMS uses a five-star quality rating system to measure the experiences Medicare beneficiaries have with their health plan and healthcare system – the Star Rating Program. Health plans are rated on a scale of 1 to 5 stars, with 5 being the highest. These ratings are then published on the Medicare Plan Finder at [medicare.gov](http://medicare.gov) to raise the quality of care for Medicare beneficiaries, strengthen beneficiary protections and help consumers compare health plans more easily.

### **Measure Description**

The percent of plan members who had documentation of receipt of notification of inpatient admission on the day of admission through two days following the admission.

### **Measure Source**

- Chart Review.
- Discharge must occur between 1/1 and 12/1 of measurement year.

### **Stars/Quality Specifications**

The percent of plan members who had documentation of receipt of notification of inpatient admission on the day of admission through two days following the admission.

### **Strategies for Success**

Documentation of admission must be filed in the medical record accessible to the member's primary care physician or ongoing care provider within two days of the member's admission.

### **Coding and Documentation Tips**

- Members who are deceased or were in hospice care any time during the measurement year are excluded.
- Documentation must include that the patient is being admitted to inpatient.
- Notification of a provider sending a member to the ED or observation does not meet criteria.
- Documentation must be in the member's primary care physician or ongoing care provider's medical record.

If you have any questions, please contact your Provider Relations Specialist.