



Aug 13, 2021

For Truli for Health and Florida Blue Providers

ADMINISTRATIVE NEWS

Referring to In-Network Labs Is Important for Your Patients

Remember to always refer services for your Florida Blue and Florida Blue Medicare patients to in-network lab providers. The agreement terms with our contracted providers require lab service referrals to in-network lab providers. Also, referring to in-network labs helps our member, your patient, avoid significant out-of-pocket costs. [Learn more>>](#)

For Florida Blue Providers Only

MEDICARE STARS

Medication Reconciliation Post Discharge Documentation and CPT II Coding FAQs

Medication Reconciliation Post Discharge (MRP) is one of the Transitions of Care (TRC) sub-measures. This quality measure assesses the percentage of discharges (acute and/or non-acute) for members age 18 or older whose medications were reconciled on the date of discharge through 30 days after discharge (31 total days). Now available for your information are MRP Documentation and CPT II Code Frequently Asked Questions. [Learn more>>](#)

Use CPT® II Codes to Show Patients' Care Is Complete

(for A1c, BP, Care for Older Adults, DRE, Microalbuminuria and MRP)

Remember to include Current Procedural Terminology (CPT) II codes with all your Florida Blue Medicare Advantage patient claims for HbA1c, microalbumin tests and the two codes for blood pressure readings for claims with a hypertension diagnosis. Your claims will not be denied or rejected because they lack these codes; however, this information helps us report our members' health outcomes to the Centers for Medicare & Medicaid Services (CMS) for the Medicare Stars program. [Learn more>>](#)

Upcoming CMS Medicare Health Outcomes Survey

Each year, Medicare Advantage plans are required to participate in the Health Outcomes Survey (HOS), as conducted by CMS. This survey is intended to gauge how well your patients' physical and mental health are maintained or improved over time. [Learn more>>](#)

