



Care for Older Adults (COA)

For the Medicare line of business

One prevention and screening measure for the Centers for Medicare & Medicaid Services (CMS) Star ratings system and the Healthcare Effectiveness Data and Information Set (HEDIS®) is care for older adults (COA). This measure evaluates the percentage of adults 66 years and older who had each of the following during the measurement year: medication review, functional status assessment and pain assessment. Below are the Current Procedural Terminology (CPT®), Current Procedural Terminology Category II (CPT II) and Healthcare Common Procedure Coding System (HCPCS) codes that indicate that these services have been performed.

Code	Code Type	Definition
90863	CPT	Pharmacologic management, including prescription, use and review of medication with no more than minimal medical psychotherapy
99605	CPT	Medication therapy management service(s) provided by a pharmacist, face-to-face with patient, with assessment and intervention if provided, initial 15 minutes, new patient
99606	CPT	Medication therapy management service(s) provided by a pharmacist, face-to-face with patient, with assessment and intervention if provided, initial 15 minutes, established patient
1159F	CPT II	Medication list documented in medical record
1160F	CPT II	Review of all medications by a prescribing practitioner or clinical pharmacist document in the medical record
1170F	CPT II	Functional status assessed
1125F	CPT II	Pain severity quantified; pain present
1126F	CPT II	Pain severity quantified; no pain present
1157F	CPT II	Advance care plan or similar legal document present in the medical record
1158F	CPT II	Advance care planning discussion documented in the medical record
G8427	HCPCS	List of current medications (includes prescription, over-the-counter, herbals, vitamin/mineral/dietary [nutritional] supplements) documented by the provider, including drug name, dosage, frequency and route
S0257	HCPCS	Counseling and discussion regarding advance directives or end-of-life care planning and decisions, with patient and/or surrogate (list separately in addition to code for appropriate evaluation and management service)

CPT codes are the Current Procedural Terminology codes developed by the American Medical Association.

HEDIS® is a set of standardized performance measures designed to help purchasers and consumers compare the performance of health plans on an “apples-to-apples” basis. HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).