DMC-ODS Discharge Services Codes

CPT / HCPCS CODE	CODE SERVICE DESCRIPTION	CODE GUIDANCE AND USAGE	ALLOWABLE DISCIPLINES	DOCUMENTATION TIPS
99495	Transitional care management services within 14 calendar days	Includes direct contact, telephone, or electronic communication Services are for a new or established patient during transition of care from an inpatient hospital setting (acute hospital, rehabilitation, long-term acute hospital), partial hospital, observation status in hospital or SNF to the patient's community setting (home, hotel, campground, hostel, cruise ship, rest home, assisted living).	LP, PA, NP	Required documentation elements: • Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge • At least moderate level of medical decision making during the service period • Face-to-face visit within 14 calendar days of discharge Address and document any needed coordination of care performed by multiple disciplines and community service agencies. The reporting individual provides or oversees the management and/or coordination of services, as needed, for all medical conditions, psychosocial needs and activity of daily living support by providing first contact and continuous access.
99496	Transitional care management services within 7 calendar days	Includes direct contact, telephone, or electronic communication Services are for a new or established patient during transition of care from an inpatient hospital setting (acute hospital, rehabilitation, long-term acute hospital), partial hospital, observation status in hospital or SNF to the patient's community setting (home, hotel,	LP, PA, NP	Required documentation elements: • Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge • High level of medical decision making during the service period • Face-to-face visit within 7 calendar days of discharge Address and document any needed coordination of care performed by multiple disciplines and community service agencies. The reporting individual provides or oversees the management and/or coordination of services, as needed, for all medical conditions, psychosocial needs and activity of daily living support by providing first contact and continuous access.

		campground, hostel, cruise ship, rest home, assisted living).		
T1007	Alcohol and/or substance abuse services; treatment plan development and/or modification	Treatment plan development and modification	LP, PA, Psy, LCSW, MFT, RN, NP, LPCC, AOD	• Should be used for both the initial treatment plan as well as the modification to an existing treatment plan. • Document any referrals to recovery resources and/or medical providers to support the patient's transition.