

Opening Transitions of Care Codes

P&CE Subcommittee

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Presented by:

Dr. Lisa Rothgery, Chief Medical Officer

Helen Fraser, Quality Section Manager



TOC Codes: What

- Opening Transitional Care Management codes 99495 and 99496 that outpatient providers can bill for follow-up visits within 14 days of discharge from inpatient or observation-level care.
 - We refer to these as Transitions of Care (TOC) codes.
- Providers must complete the following activities to bill these codes:
 1. Make 2 attempts to contact patient within 2 business days of discharge and complete appropriate documentation at first contact.
 2. Schedule a follow-up appointment within 14 days after discharge (face-to-face or virtual).
 3. Complete medication reconciliation by the follow-up appointment.
- For Health First Colorado, TOC codes will be billed at the same rate as the Evaluation and Management (E/M) codes. (e.g., 99495 same as 99214, 99496 same as 99215)



TOC Codes: Who and When



- Codes expected to open January 2026.
- Primarily used by primary care providers, but specialists can also use them.
- First provider, primary care or specialist, who uses the TOC code is the provider reimbursed for that visit.



TOC Codes: Why

- Allows providers to have standardized workflows for all patients, regardless of payer.
- Encourages follow-up visits to reduce avoidable readmissions and improve overall outcomes for members.
- Allows RAEs to more effectively monitor when these visits happen to support members' care coordination.
- ACC Phase III program alignment:
 - Emphasis on TOC as one of our cost control measures.
 - Improved tracking of TOC allows us to better analyze the impact.
 - RAE quality metric.
 - Shared savings opportunity.



TOC Codes: Discussion

- How can HCPF and the RAEs engage with providers to encourage the use of these codes?
- Are there unintended consequences we should consider for members or providers when opening these codes?
- What else should HCPF consider as we prepare to open these codes?