3. For Meaningful Use 2, what qualifies as a transfer of care for the medication reconciliation objective?

In its description of medication reconciliation Medicare states the objective of this core measure to be: "The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant should perform medication reconciliation."

Medicare defines **transition of care** as, "The movement of a patient from one clinical setting (inpatient, outpatient, physician office, home health, rehab, long-term care facility, etc.) to another or from one EP to another. At a minimum, transitions of care include first encounters with a new patient and encounters with existing patients where a summary of care record (of any type) is provided to the receiving provider. The summary of care record can be provided either by the patient or by the referring/transiting provider or institution."

Medication reconciliation is defined as "The process of identifying the most accurate list of all medications that the patient is taking, including name, dosage, frequency, and route, by comparing the medical record to an external list of medications obtained from a patient, hospital, or other provider."

Medicare's detailed description of this core measure can be found here.