AAVBC

AMERICAN ACADEMY OF VALUE BASED CARE

Medication Reconciliation Post-Discharge

Quick Reference Guide

2026

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MEASURE SNAPSHOT

CMS Part C Star Measure: C17 – Medication Reconciliation Post-Discharge

CMS Definition: The percentage of discharges from **January 1 to December 1** of the measurement year, for patients 18 and older, for which **medications were reconciled within 30 days after discharge** (31 total days).

Medication reconciliation is a formal clinical process performed within 30 days of inpatient discharge where a qualified professional (prescribing practitioner, clinical pharmacist, PA, or RN) explicitly compares a patient's newly prescribed hospital discharge medications against their pre-admission home regimen, documents any additions, changes, or continuations, and updates the outpatient medical record (reported via **CPT-II 1111F**).[1]

FIELD	ENTRY
CMS measure name	Medication Reconciliation Post-Discharge, MRP
Domain	Managing Chronic (Long Term) Conditions
CMS weighting category	Process Measure
Weight	**1, standard-weighted**
Primary data source	HEDIS, claims and medical-record documentation
Unit of measurement	CMS contract-level measure, individual clinicians and practices do not receive a C17 Star Rating
Trend direction	**Higher is better**
Case-mix adjusted	No
Measurement period	01/01/2024 – 12/31/2024. Used to calculate Star Ratings Year 2026, published two years after the measurement period ends[1]
Star measure credit	A qualifying reconciliation documented in the outpatient record inside the 31-day window, reached through a claim carrying **CPT II 1111F** or an eligible bundled code, or through chart documentation found at medical-record review. **No face-to-face visit is required**; a telephone or chart-review reconciliation by an eligible healthcare professional counts[1,2]
Measure retirement	**SY2026 is the final Star Ratings year in which this measure appears standalone. It is removed beginning Star Year 2027.** The same reconciliation work continues to earn Star credit as one of the four components of Transitions of Care **(C20)**[3]
Statistical method	Clustering. Cut points are recalculated each year from the distribution of contract scores and are not fixed targets[1]