

Value of the Annual Wellness Visit 2020

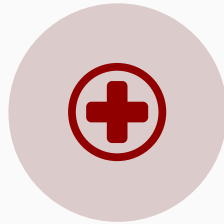


WHAT IS THE ANNUAL WELLNESS VISIT (AWV)

Annual Wellness Visit

- The annual Wellness visit (AWV) was introduced in January 2011 as a result of the Affordable Care Act.
- The purpose of the AWV is to get a comprehensive picture of the patient's health risk, goals and barriers; and to create a plan for the wellness and preventative plan of care.
- Helps patients understand their risk factors and what they can do to prevent disease, learn about screenings and become more engaged in their care and improve health outcomes
- Reassess risk factors and chronic conditions every year (RAF), Meet quality measures and improve satisfaction scores.

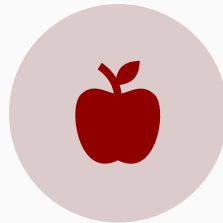
Benefits of the AWW



IDENTIFY
HEALTH RISKS



INTERVENE
EARLY



PROMOTE
HEALTHY
OUTCOMES

- Provide preventative services for patients
- Address Gaps in Care/Improve quality metrics
- Document and assess chronic conditions
- Strengthen the provider/patient relationship
- Increase patient engagement through collaboration and education
- Create a sustainable revenue stream



Researchers estimate that as much as 75% of all health care costs are due directly to preventable chronic conditions, But as recently as 2004, only 1 percent of money spent on health care was on prevention.

- 1. Center for Medicare & Medicaid Services. National Health Expenditures and Selected Economic Indicators, Levels and Average Annual Percent Change: Selected Calendar Years 1990-2013. Washington, DC: Center for Medicare & Medicaid Services, Office of the Actuary; 2004.
- 2. Institute of Medicine. The Future of the Public's Health in the 21st Century. Washington, DC: National Academy Press; 2002.

Types of AWW

The Initial Preventive Physical Exam (IPPE)

G0468 + G0402

- Also known as the “Welcome to Medicare Visit”
- One-time benefit for new Medicare enrollees
- Completed in first 12 months of part B coverage

Initial Annual Wellness Visit

G0468 + G0438

- First AWW received by a beneficiary, one per lifetime
- Completed after 12 months of Part B coverage
- No IPPE or AWW can be billed in previous 12 months

Subsequent Annual Wellness Visit

G0468 + G0439

- Applicable for all AWWs after the Initial AWW (G0438)
- No IPPE in previous 12 months
- Can be completed annually each calendar year

Medicare Advantage: Separate reimbursement is allowed for a IPPE/AWW and an Annual Preventative Physical Exam when performed on the same day by the same provider.

Code: G0466 + 99385-99387 (New pt) or G0466 + 99395-99397 (est. pt.) using modifier 59

	IPPE -G0402 Also known as the "Welcome to Medicare Visit"	Initial AWV- G0438	Subsequent AWV • G0439
Information gathering	<ul style="list-style-type: none"> <input type="checkbox"/> Review the medical and social history with attention to modifiable risk factors: <ul style="list-style-type: none"> <input type="checkbox"/> Past medical/surgical history, <input type="checkbox"/> Current medications and supplements, <input type="checkbox"/> Family history, <input type="checkbox"/> History of alcohol, tobacco, and illicit drug use, <input type="checkbox"/> Diet, <input type="checkbox"/> Physical activity. <input type="checkbox"/> Review potential risk factors for depression or other mood disorders <input type="checkbox"/> Review functional ability and level of safety: <ul style="list-style-type: none"> <input type="checkbox"/> Hearing impairment, <input type="checkbox"/> Activities of daily living, <input type="checkbox"/> Fall risk, <input type="checkbox"/> Home safety. 	<ul style="list-style-type: none"> <input type="checkbox"/> Establish the medical/family history <ul style="list-style-type: none"> <input type="checkbox"/> Past medical/surgical history, <input type="checkbox"/> Current medications and supplements, <input type="checkbox"/> Family history <input type="checkbox"/> Review the patient's health risk assessment, which includes: <ul style="list-style-type: none"> <input type="checkbox"/> Demographic data, <input type="checkbox"/> Self-assessment of health status, <input type="checkbox"/> Psychosocial risks, <input type="checkbox"/> Behavioral risks, <input type="checkbox"/> Activities of daily living (dressing, bathing, walking, etc.), <input type="checkbox"/> Instrumental activities of daily living (shopping, housekeeping, etc.). <input type="checkbox"/> Review potential risk factors for depression. <input type="checkbox"/> Review functional ability and level of safety: <ul style="list-style-type: none"> <input type="checkbox"/> Hearing impairment, <input type="checkbox"/> Activities of daily living, <input type="checkbox"/> Fall risk, <input type="checkbox"/> Home safety. <input type="checkbox"/> Establish a list of current providers and suppliers regularly involved in the individual's medical care 	<ul style="list-style-type: none"> <input type="checkbox"/> Update the medical/family history: <ul style="list-style-type: none"> <input type="checkbox"/> Past medical surgical history, <input type="checkbox"/> Current medications and supplements, <input type="checkbox"/> Family history. <input type="checkbox"/> Review the updated health risk assessment, which includes: <ul style="list-style-type: none"> <input type="checkbox"/> Demographic data, <input type="checkbox"/> Self-assessment of health status, <input type="checkbox"/> Psychosocial risks, <input type="checkbox"/> Behavioral risks, <input type="checkbox"/> Activities of daily living (dressing, bathing, walking, etc.), <input type="checkbox"/> Instrumental activities of daily living (shopping, housekeeping, etc.). <input type="checkbox"/> Update the list of current providers and suppliers regularly involved in the individual's medical care.
Exam/assessment	<ul style="list-style-type: none"> <input type="checkbox"/> Obtain the following: <ul style="list-style-type: none"> <input type="checkbox"/> Height, <input type="checkbox"/> Weight, <input type="checkbox"/> Body mass index, <input type="checkbox"/> Blood pressure (BP), <input type="checkbox"/> Visual acuity, <input type="checkbox"/> Other items as appropriate. <input type="checkbox"/> Conduct end-of-life planning if the individual agrees. 	<ul style="list-style-type: none"> <input type="checkbox"/> Obtain the following <ul style="list-style-type: none"> <input type="checkbox"/> Height, <input type="checkbox"/> Weight, <input type="checkbox"/> BMI (or waist circumference), <input type="checkbox"/> BP, <input type="checkbox"/> Other items as appropriate. <input type="checkbox"/> Detect any cognitive impairment. 	<ul style="list-style-type: none"> <input type="checkbox"/> Obtain the following: <ul style="list-style-type: none"> <input type="checkbox"/> Weight (or waist circumference), <input type="checkbox"/> BP, <input type="checkbox"/> Other items as appropriate. <input type="checkbox"/> Detect any cognitive impairment
Counseling	<ul style="list-style-type: none"> <input type="checkbox"/> Educate, counsel, and refer based on the previous five elements. <input type="checkbox"/> Educate, counsel. And refer for other preventive services. Create a brief written plan (e.g., a checklist) that includes: <ul style="list-style-type: none"> <input type="checkbox"/> A once-in-a-lifetime screening electrocardiogram (G0403-G0405), as appropriate, <input type="checkbox"/> Other appropriate screenings and preventive services that Medicare covers. 	<ul style="list-style-type: none"> <input type="checkbox"/> Establish a written screening schedule, such as a checklist for the next 5 to 10 years, as appropriate <input type="checkbox"/> Establish a list of risk factors and conditions for which interventions are recommended or underway. <input type="checkbox"/> Furnish personalized health advice and a referral as appropriate to health education or preventive counseling services or programs. <input type="checkbox"/> Provide any other element determined appropriate through the National Coverage Determination process. 	<ul style="list-style-type: none"> <input type="checkbox"/> Update the written screening schedule developed at the initial AWV. <input type="checkbox"/> Update the list of risk factors and conditions for which interventions are recommended or underway. <input type="checkbox"/> Furnish personalized health advice and a referral as appropriate to health education or preventative counseling services or programs. <input type="checkbox"/> Provide any other element determined appropriate through the National Coverage Determination process

What's Included in the AWW

Gather Patient Information

- HRA
- Patient History
- Depression and Substance Abuse Screening
- Review of functional ability

Assessment

- Patient Measurements
- Cognitive Impairment

Counsel

- Screening schedule,
- List of risk factors or conditions and recommended interventions
- Advanced Care Planning
- Written Individualized health plan and referrals

Health Risk Assessment

Action	Elements
1. Perform an HRA	<ul style="list-style-type: none"> ● Get self-reported information from the beneficiary <ul style="list-style-type: none"> ○ You or the beneficiary can complete the HRA before or during the AWW encounter; it should take no more than 20 minutes ● Consider the best way to communicate with underserved populations, persons with limited English proficiency, persons with health literacy needs, and persons with disabilities ● At a minimum, get information on the following topics: <ul style="list-style-type: none"> ○ Demographic data ○ Self-assessment of health status ○ Psychosocial risks ○ Behavioral risks ○ Activities of Daily Living (ADLs), including but not limited to: dressing, bathing, and walking ○ Instrumental ADLs (IADLs), including but not limited to: shopping, housekeeping, managing own medications, and handling finances

Patient History



Establish the Medical History

Illnesses, hospital stays, operations, allergies, injuries, treatments



Establish the Family History

Include parents, siblings and children



Establish a list of current medical providers/suppliers

Best Practice Note: Include a medication review and update diagnosis list

Additional Patient Information

Depression and Substance Misuse



REVIEW PAST
EXPERIENCES WITH
DEPRESSION OR
MOOD DISORDERS



ADMINISTER THE
PHQ-2 OR PHQ-9



ADMINISTER THE
AUDIT OR CAGE

Functional Ability

Review based on observation or appropriate screening questions.

At a minimum:

- Ability to Perform ADLs
 - Observation and/or questionnaire
- Fall Risk
 - STEADI Fall Risk or TUG
 - CDC Algorithm for Fall Risk
- Hearing Impairment
 - Clinical tests and/or questionnaire
- Home Safety

Assessment

Patient Measurements

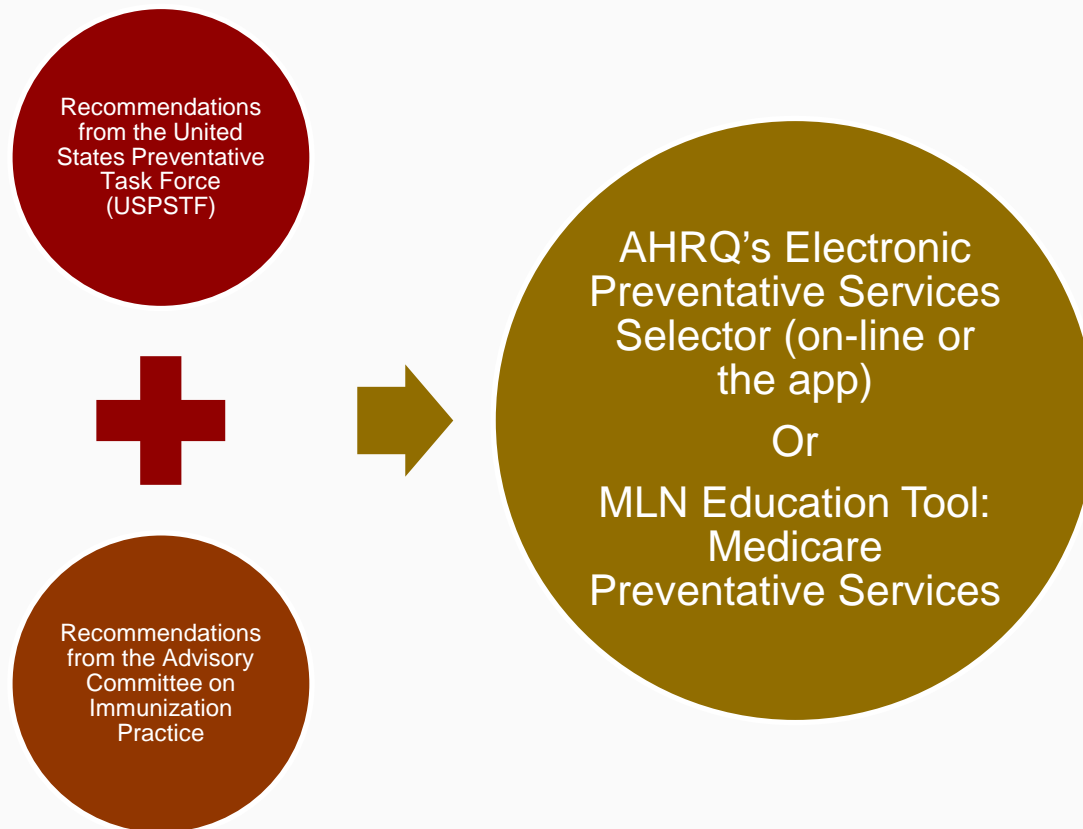
- Height
- Weight
- Body Mass Index (BMI)
- Blood Pressure
- Other routine measurement deemed appropriate

Cognitive Impairment

- Administer standardized test
 - Mini-Cog
 - MMSE – Mini Mental Status Exam
 - SLUMS – St Louis University Mental Status
- Subjective Review
 - Direct observation of patient's cognitive function
 - Information obtained from patient
 - Concerns from family and/or friends

Screening and Referrals

Screening Schedule



Recommendations and Referrals

- List of risk factors and conditions including recommended interventions
- Preventative Screens
- Behavioral Health or Substance Use Counseling and/or referrals
- Tobacco Counseling
- Nutrition or Weight Loss
- Fall Prevention

Counseling

Advanced Care Planning

Discussion should include

- Future Care Decision
- How to share the information
- Caregiver identification
- Advanced Directives

Resources

- Coloradocareplanning.org
- MOST
- 5 Wishes

Written Care Plan or Checklist

- Specific to that patient
- Concerns identified in HRA and Follow-up
- Review of current health status including
 - Risk factors
 - Conditions
 - Treatment Options
- Recommended Screenings
- Referrals and information
 - Specialists
 - Health Education
 - Preventative Counseling Services or Programs

Implementing the AWW

Who can Provide the AWW

- Physician (MD/DO)
- Qualified Advanced Practice Practitioner
- Medical Professional (including a health educator, RN, RD, PharmD, or other licensed practitioner) or a team of medical professionals working under direct supervision of physician

Implementation of the AWW



Establish process and identify eligible patients



Perform outreach and engagement



Perform AWW encounter



Complete Appropriate coding and billing