Making the most of Annual Wellness Visits and Preventative Care Services for Medicare Part B Members

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Benefits of an Annual Wellness Visit

• Keep patients as healthy as possible
• Addresses gaps in care
• Enhances the quality of care you deliver
• A personalized prevention-improve patient engagement and promote preventative health care
What is preventative care services?

Preventative care services is care that is designed to:

- Prevent illness
- Detect medical conditions
- And keep members healthy

Services include screenings, vaccines and counseling.

It is not a head-to-toe physical assessment.

As long as Medicare eligibility requirements are met, preventative services which are recommended by the U.S. Preventative Services Task Force are:

- Covered at 100%
- Required to be covered without deductibles, copayments, or coinsurance
Who is eligible for preventative care services and what are they?

Medicare members of any age who receive Part B coverage are entitled to:

- A **one-time** Initial Preventive Physical Examination (**IPPE**) during the first 12 months of coverage (**G0402**)  
  **OR**

- If a member did not receive an IPPE during that time, they are eligible for the Initial Annual Wellness Visit and a Personalized Prevention Plan of Service (**AWV and PPPS**) (**G0438**)  
  **AND**

- After receiving either the IPPE or the Initial AWV and PPPS, members are eligible for the subsequent AWV and Personalized Prevention Plan of Service (**Subsequent AWV-PPPS**) each year they are covered. (**G0439**)
What is included in the Initial Preventive Physical Examination (IPPE)

The IPPE is known as the “Welcome to Medicare” preventive visit. The IPPE goals is to promote health and disease prevention and detection. Patients are eligible for this visit once per lifetime no later than the first 12 months after the patient’s Medicare Part B benefits eligibility date.

- Medical and social history with attention to modifiable risk factors
- List of current providers & suppliers
- Detection of any cognitive impairment the patient may have
- Review the patient’s potential risk factors for depression
- Exam-Height, Weight, Blood pressure, Body Mass Index (BMI) and visual acuity screen
- Functional ability and level of safety (ADLs, IADLs, Fall Risk, Hearing Impairment)
- End-of-life planning
- Educate, counsel, and refer based on the previous components
- Educate, counsel, and refer for other preventive services (Colon Ca Screen, Mammogram, etc...)
What is included in an Initial Annual Wellness Visit and a Personalized Prevention Plan of Service (AWV and PPPS)?

The Initial Annual Wellness Visit is performed when the member is no longer in the first 12 months of coverage and has not received an IPPE within the past 12 months. This means the member did not have a “Welcome to Medicare” visit during their first 12 months of enrollment with Medicare. The Initial Annual Wellness Visit includes a Health Risk Assessment (HRA) and a Personalized Prevention Plan of Service (PPPS).

Components include:

• HRA Assessment
  ❖ You or the patient complete the HRA before or during the AWV; it should take no more than 20 minutes
  ❖ Consider the best way to communicate with your patients
  ❖ All the other components in the IPPE
What is included in an Subsequent Annual Wellness Visit and a Personalized Prevention Plan of Service (AWV and PPPS)?

A patient is eligible for their subsequent AWV, one year after their initial visit. The Subsequent Annual Wellness Visit also includes an Health Risk Assessment (HRA) and Personalized Prevention Plan Services (PPPS). During this visit the provider updates/reviews the AWV components such as:

- HRA
- Medical and social history
- List of current providers & suppliers
- Patient’s potential risk factors for depression
- Exam-Height, Weight, Blood pressure, Body Mass Index (BMI) and visual acuity screen
- Functional ability and level of safety (ADLs, IADLs, Fall Risk, Hearing Impairment)
- End-of-life planning
- Educate, counsel, and refer
What type of provider can perform an Annual Wellness Visit?

Medicare Part B covers an AWV if performed by a:

- Physician (a doctor of medicine or osteopathy)
- Qualified non-physician practitioner, such as a physician assistant, nurse practitioner, or certified clinical nurse specialist
- Medical professional such as a health educator, registered dietitian, nutrition professional, or other licensed practitioner directly supervised by a physician
What is Mercy Care Advantage doing to help me the provider?

At the beginning of year each Mercy Care Advantage mails to each primary care provider a list of their members who are eligible for the IPPE, Annual Wellness Visit, or a Subsequent AWV. This is determined according to claims information. We also supply the last known date of service if an IPPE or AWV has been preformed.

This information is also available during the year if requested.

*Please see attached version of letter
Dear Physician or Health Care Professional:

Mercy Care Advantage (HMO SNP) would like to partner with you in our continued efforts to improve quality care and health outcomes for our members. Medicare Members who receive Part B coverage are entitled to:

A one-time Initial Preventive Physical Examination (**IPPE**) during the first 12 months of coverage;

**OR**

If a member did not receive an IPPE during that time, they are eligible for the Initial Annual Wellness Visit and a personalized prevention plan of service (**AWV and PPPS**);

**AND**

After receiving either the IPPE or the Initial AWV and PPPS, members are eligible for the subsequent AWV and personalized prevention plan of service (**Subsequent AWV-PPPS**) each year they are covered.
Optional Element of Annual Wellness Visit

Providers are to waive the deductible and the coinsurance of ACP, if provided as an optional element of AWV.

Advanced Care Planning CPT-99497 - To include the explanation and discussion of advanced directives such as standard forms (with completion of such forms, when performed), by the physician or other qualified health care professional; first 30 minutes, face to face with patient, family members(s) and/or surrogate. (A diagnosis code is required and should be consistent with the beneficiary’s exam.)

Advanced Care Planning CPT-99483 – Effective January 1, 2018, under CPT code 99483, clinicians can be reimbursed for providing care planning services to individuals with cognitive impairment, including Alzheimer’s disease. This code replaces the temporary code (G0505) that was in place under Medicare and Tricare in 2017.(alzimpact.org

The Annual Wellness Visit provides an excellent opportunity for members and their providers to collaborate on a Personalized Prevention Plan. The Annual Wellness Visit is a covered benefit for Mercy Care Advantage members and is a preventive wellness visit - NOT a “routine physical checkup.” All elements must be provided before submitting a claim for the AWV.
Mercy Care Advantage Annual Wellness Visit provider letter

To know if a beneficiary already received his/her first AWV from another provider and to know whether to bill for a subsequent AWV even though this is the first AVW you provided to this beneficiary you can:


Check with the Medicare Administrative Contractor (MAC) at 877-908-8431 or signup for the Noridian Medicare Portal on the following website: [https://med.noridianmedicare.com/web/jfa](https://med.noridianmedicare.com/web/jfa).
Mercy Care Advantage Annual Wellness Visit provider letter

In order to assist your office in providing this valuable service, Mercy Care Advantage (HMO SNP) is providing a list of assigned members who are eligible for an AWV and the status of any previous Annual Wellness Visits.

Components needed to meet the quality metrics of AWV include:
  o  Health Risk Assessment (HRA)
  o  Establish/Update/Educate/Refer for Preventative Screenings (Colonoscopy, Mammogram, Pap, Labs, Diabetic Screening, Eye Exam, Vaccines)
  o  Establish/Update a list of current providers/suppliers (Specialist, pharmacies)
  o  Establish/Update Medical/Social and Family History
  o  Review/Update functional ability and level of safety (ADL/IADL, fall risk, hearing impairment)
  o  Physical Exam (Vitals, BMI, visual acuity)
  o  Establish/Update any cognitive impairment (Observation, obtained by family, friends)
  o  Provide personalized health advice or preventative counseling services as appropriate (Self-management, nutrition, physical activity, tobacco-use cessation, weight loss, fall prevention)
  o  End of life planning, Advance Directives (Discussion, verbal or written information provided if no plan is noted)
Mercy Care Advantage also mails members educational information on the Annual Wellness Visit and the mailing includes a copy of MCA’s Health Risk Assessment (HRA). Additionally, MCA offers members an incentive of a $25 gift card for completion of an AWV, and a $15 gift card for completion of the HRA. Please help us to encourage members to complete these.

For more information on the Annual Wellness Visit, please refer to the CMS Medicare Wellness Visits website which can be found at: https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/preventive-services/medicare-wellness-visits.html.
Mercy Care Advantage Annual Wellness Visit provider letter

Thank you for your continued assistance in improving the health of our members, your patients. Should you have any questions, please contact Carmen Batista RN, BS, CCM QM Project Manager at 754-332-3033.

Charlton Wilson, MD, FACP, FACHE
Chief Medical Officer

Mercy Care Advantage (HMO SNP) is a Coordinated Care Plan with a Medicare contract and a contract with the Arizona Medicaid Program. Enrollment in Mercy Care Advantage depends on contract renewal
What is Mercy Care Advantage doing for its members?

At the beginning of year each Mercy Care Advantage members receives a brochure regarding the Annual Wellness Visit.

This brochure contains:

• Health Risk Assessment form
• Recommendations for members to prepare for their visit.
Questions from the Health Risk Assessment:

**General Health**
In general, would you say your health is:
- Excellent
- Very good
- Good
- Fair
- Poor

How would you describe the condition of your mouth and teeth—including false teeth or dentures?
- Excellent
- Very good
- Good
- Fair
- Poor

**Activities of Daily Living**
In the past 7 days, did you need help from others to perform everyday activities such as eating, getting dressed, grooming, bathing, walking, or using the toilet?
- Yes
- No

**Instrumental Activities of Daily Living**
In the past 7 days, did you need help from others to take care of things such as laundry and housekeeping, banking, shopping, using the telephone, food preparation, transportation, or taking your own medications?
- Yes
- No
**Physical Activity**

In the past 7 days, how many days did you exercise?
______ days

On days when you exercised, for how long did you exercise (in minutes)?
______ minutes per day

- Does not apply

How intense was your typical exercise?

- Light (like stretching or slow walking)
- Moderate (like brisk walking)
- Heavy (like jogging or swimming)
- Very heavy (like fast running or stair climbing)
- I am currently not exercising

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**Tobacco Use**

In the last 30 days, have you used tobacco?

- Smoked:  
  - Yes
  - No

- Used a smokeless tobacco product:
  - Yes
  - No

If Yes to either, Would you be interested in quitting tobacco use within the next month?

- Yes
- No
Questions from the Health Risk Assessment:

**Blood Pressure**
If your blood pressure was checked *within the past year*, what was it when it was last checked?
- Low or normal (at or below 120/80)
- Borderline high (120/80 to 139/89)
- High (140/90 or higher)
- Don’t know/not sure

**Cholesterol**
If your cholesterol was checked *within the past year*, what was your total cholesterol when it was last checked?
- Desirable (below 200)
- Borderline high (200–239)
- High (240 or higher)
- Don’t know/not sure

**Overweight/Obesity**
What is your height without shoes? (for example, 5 feet and 6 inches = 5’6”)
Feet _______ Inches _______
What is your weight?_________
Weight in pounds ___________
Questions from the Health Risk Assessment:

**Blood Glucose**
If your glucose was checked, what was your fasting blood glucose (blood sugar) level the last time it was checked?
- Desirable (below 100)
- Borderline high (100–125)
- High (126 or higher)
- Don’t know/not sure

If diabetic, and if you have had your hemoglobin A1c level checked in the past year, what was it the last time you had it checked?
- Desirable (6 or lower)
- Borderline high (7)
- High (8 or higher)
- Don’t know/not sure

**Social/Emotional Support**
How often do you get the social and emotional support you need:
- Always
- Usually
- Sometimes
- Rarely
- Never

**Pain**
In the past 7 days, how much pain have you felt?
- None
- Some
- A lot
## Questions from the Health Risk Assessment:

### Alcohol Use

In the past 7 days, on how many days did you drink alcohol? _______ days

On days when you drank alcohol, how often did you have (5 or more for men, 4 or more for women and those men and women 65 years old or over) alcoholic drinks on one occasion?

- [ ] Never
- [ ] Once during the week
- [ ] 2-3 times during the week
- [ ] More than 3 times during the week

Do you ever drive after drinking, or ride with a driver who has been drinking?

- [ ] Yes
- [ ] No

### Seat Belt Use

Do you always fasten your seat belt when you are in a car?

- [ ] Yes
- [ ] No
Questions from the Health Risk Assessment:

Depression

In the past 2 weeks, how often have you felt down, depressed, or hopeless?
- Almost all of the time
- Most of the time
- Some of the time
- Almost never

In the past 2 weeks, how often have you felt little interest or pleasure in doing things?
- Almost all of the time
- Most of the time
- Some of the time
- Almost never

Have your feelings caused you distress or interfered with your ability to get along socially with family or friends?
- Yes
- No

If Yes to either, Would you be interested in quitting tobacco use within the next month?
- Yes
- No
### Anxiety

In the past 2 weeks, how often have you felt nervous, anxious, or on edge?

- Almost all of the time
- Most of the time
- Some of the time
- Almost never

In the past 2 weeks, how often were you not able to stop worrying or control your worrying?

- Almost all of the time
- Most of the time
- Some of the time
- Almost never

### Stress

How often is stress a problem for you in handling such things as:

- Your health?
- Your finances?
- Your family or social relationships?
- Your work?

- Never or rarely
- Sometimes
- Often
- Always
**Questions from the Health Risk Assessment:**

**Sleep**

Each night, how many hours of sleep do you usually get?

___ hours

Do you snore or has anyone told you that you snore?

- Yes
- No

In the past 7 days, how often have you felt sleepy during the daytime?

- Always
- Usually
- Sometimes
- Rarely
- Never
What can I do as a provider to prepare members for their Annual Wellness Visit?

Providers can prepare their members by recommending that members bring the following to their annual wellness visit:

- Copy of their Annual Wellness Visit brochure with the Health Risk assessment form completed
- Copy of any medical records, including immunizations and family history
- List of or actual medications and supplements with dose and frequency
- Full list of current providers and suppliers
- Copy of advanced directives such as a living will or health care power of attorney
How can I verify if a member has already received this service from another provider?

To know if a beneficiary already received services from another provider and to know what to bill for even though this is the first AVW you provided to this beneficiary you can:

Access the information through the Health Insurance Portability and Accountability Act (HIPPA) Eligibility Transaction System (HETS). To sign up and learn more, please check out the following website: https://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/HETSHelp/Index.html.

Check with the Medicare Administrative Contractor (MAC) at 877-908-8431 or signup for the Noridian Medicare Portal on the following website: https://med.noridianmedicare.com/web/jfa.
Where can I find out more information regarding Annual Wellness Visits?

Who can I contact at Mercy Care Advantage if I have questions regarding Annual Wellness Visits?

Should you have any questions, please contact Carmen Batista RN, BSN, CCM QM HEDIS Project Manager 754-332-3033 OR BatistaC@MercyCareAZ.org
Thank You