

Leveraging the annual wellness visit for annual recapture of chronic conditions

As we move into the new year, now is the ideal time for a proactive approach to chronic condition capture. Leveraging the annual wellness visit (AWV) as an opportunity to assess and redocument chronic conditions supports patient care, coding integrity and the foundation of care management.

Using the AWV to assess and redocument stable chronic conditions

The AWV offers a touchpoint as a preventive, service-oriented visit rather than a symptom or treatment-oriented visit. Regulations for the AWV require updating the health risk assessment (HRA), medical and family history, current providers or suppliers, vital signs and measurements, cognitive and functional screening and preparing a personalized prevention plan.

Although the intent of the AWV is not a full treatment of acute and chronic disease exacerbations, it is a prime time to verify and document chronic diagnoses and link them to the prevention plan.

The importance of yearly documentation for all chronic diagnoses

Chronic conditions are seldom static. While many patients remain stable, their status, treatment plans, monitoring needs and risk profiles evolve. Annually capturing each chronic diagnosis serves multiple purposes:

- It verifies that the condition remains active and managed, which supports continuity of care and care management planning.
- It triggers the annual review of labs, treatments, complications and related risks, keeping the care team aligned.
- It ensures that stable chronic conditions remain visible and tracked, strengthening risk adjustment capture.

Best practice tip: At the patient's annual visit, review every active chronic diagnosis (e.g., hypertension, diabetes, COPD, CHF, CKD, etc.) and confirm that documentation answers:

- Is the condition still active?
- What is the status?
- Is the treatment plan unchanged, modified or needing escalation?
- Are there new complications, labs or screening gaps?

Example: diabetes recapture

A Medicare member with type 2 diabetes mellitus (T2DM) attends their AWV.

- During the HRA review and update of medical history, you note: “Diagnosis: Type 2 Diabetes Mellitus, stable on metformin, last A1C 6.8% three months ago, no complications documented.”
- In your note, you explicitly state: “Active diagnosis of T2DM continues, under stable control; patient advised on screening adherence (retinal exam, foot exam, A1C schedule); prevention plan updates: reinforce diet/exercise, schedule A1C and lipids, refer to diabetes educator.”
- You place this on the problem list or ensure it remains current and flagged for annual or semi-annual review.

By documenting T2DM as active and managed, you maintain the visibility of the condition in your risk adjustment and chronic care monitoring programs. The AWV becomes more than a preventive check-in. It is a structured annual recapture moment.

While an AWV does not typically include treatment or management of the chronic condition, documenting the condition’s status and capturing a diagnosis code is appropriate.

Key documentation bullets for chronic conditions at the annual wellness visit

- Ensure the condition is listed as active, if still managed
- Include current control/status (lab values, clinical measures)
- Note treatment plan (medications, lifestyle, referrals)
- Screen for complications or risk factors (E.g., neuropathy, nephropathy in diabetes)
- Link to a prevention plan or monitoring plan (next labs, specialist visits, lifestyle goals)
- If stability is unchanged, this still qualifies as review/monitoring, so document that nothing has changed, but the plan remains active.

Final thoughts

The annual wellness visit is more than a preventive checkbox; it is a strategic appointment to ensure every active chronic condition is properly captured, documented and planned for. By coupling AWV workflow with a focused chronic condition recapturing, your practice will be positioned for improved patient care, stronger compliance and smoother coding and reporting.