

The Path to Wellness

Practice Resource Guide: ACO Medicare FFS

Understanding the coding requirements and elements of an Annual Wellness Visit.

1. Why is the Annual Wellness Visit (AWV) important?

The Centers for Medicare and Medicaid Services (CMS) assess an overall health status based on diagnosis codes billed to determine the level of severity of illness, risk, and resource utilization. For your patients, Medicare's Annual Wellness Visit is a way for your practice to keep them as healthy as possible. AWV addresses gaps in care and can enhance the quality of care delivered.

2. Is the AWV the same as the Welcome to Medicare Visit / Initial Preventive Physical Exam (IPPE)?

No. The Welcome to Medicare visit (IPPE) is a once per lifetime benefit that may be provided only during the first 12 months of the patient's enrollment in Medicare Part B.

3. Who is eligible for an Annual Wellness Visit?

Medicare covers an AWV for all beneficiaries who passed 12 months of eligibility for their first Medicare part B benefit period, and who have not had either an IPPE or an AWV within the past 12 months. Medicare pays for only one initial AWV per beneficiary per lifetime and only one subsequent AWV per year thereafter.

4. Is the AWV the same as a routine physical exam?

No. The AWV does not replace a complete head-to-toe physical exam. A routine physical exam is never a covered service by fee-for-service Medicare.*

* If performed patient pays 100% out-of-pocket.

5. Can evaluation and management (E/M) services be provided the same day as the AWV?

When you furnish a significant, separately identifiable, medically necessary E/M service along with the AWV, Medicare may pay for the additional service. Report the appropriate E/M service with a modifier 25.

6. Does the deductible or coinsurance/co-payment apply to the AWV?

No. Medicare waives both the coinsurance or co-payment and the Medicare Part B deductible for the AWV.

7. How do I know if a patient already got his/her IPPE or AWV from another provider?

You may access the information through the Health Insurance Portability and Accountability Act (HIPAA) eligibility Transaction System (HETS) by visiting www.cms.gov and search "HETS", or through the provider call center interactive voice responses (IVRs) by visiting www.med.noridianmedicare.com.

Welcome to Medicare Visit (IPPE) – G0402
Initial Annual Wellness Visit (AWV) - G0438
Subsequent Annual Wellness Visit (AWV) - G0439
Comprehensive Preventive Physical Exams - 99381-99397
ACP - 99497 - 99498
Depression Screening & Risk Assessment - G0444
Alcohol Misuse Screening - G0442

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Elements of the AWW:

- Demographic Data
- Self-Assessment of Health Status
- Psychosocial Risks
- Depression Screening
- Activities of Daily Living such as dressing or bathing
- Instrumental Activities of Daily Living such as shopping or housekeeping
- Falls Risk Assessment
- Incontinence Assessment
- Hearing Impairment
- Establish Current Providers and Accurate Medication List
- Obtain BMI and BP

Establish Appropriate Screening Schedule

- Colorectal cancer
- Breast cancer
- DEXA
- Immunizations

At Beneficiary's Discretion

- Advanced Care Planning
- Completion of POLST if life expectancy < 2 years



Diagnosis:

Include a diagnosis code when submitting a claim for the Annual Wellness Visit. You are not required to document a specific diagnosis code – use any diagnosis code consistent with the beneficiary's exam. Be sure to capture HCC codes and BMI dx code in first 12 codes.



Ideas for Incorporating the Annual Wellness Visit:

- Schedule patient for the AWW within the first 90 days of their eligibility
- Have office staff keep a log of patients who qualify for the annual wellness visit and when they are due
- Have office staff call patients to schedule appointment and provide health questionnaire
 - Mail to patient prior to appointment to complete and bring with them
 - Have them complete the form at the office prior to the appointment
- When setting up the appointment – office staff to remind patient to bring in medications they are taking. "Brown bag" it and consider adding to your patient reminder system
- Review Preventive Care recommendations and identify plan to recommend routine screenings such as colon cancer screening, osteoporosis, and breast cancer
- Can be performed by a medical professional working under the direct supervision of a licensed independent provider (as long as they are licensed in the state and working within their scope of practice and the LIP is present in the office at the time of AWW)
- NWMHP suggests the use of a HCC coding APP for mobile devices or integrate into your EHR

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