

Annual Wellness Visit - Physician Tip Sheet

Medicare Advantage

- The Annual Wellness Visit provides quality care through complete assessment, documentation and coding of your patients' chronic conditions.
- Quality measures are addressed when you encourage patients to get the recommended screening tests (e.g., colorectal cancer screening, mammograms, diabetic eye exam) and vaccinations.
- Health New England covers, at no cost to the member, both an Annual Wellness Visit and Annual Physical Examination.*
- Health New England is offering a \$10 reward to its Medicare Advantage members who receive their Annual Wellness Visit.



Medicare Annual Wellness Visit – HCPCS Codes

Initial visit
G0402
Initial Preventive Physical Examination (IPPE): face-to-face visit, services limited to new beneficiary during first 12 months of Medicare enrollment, also known as the "Welcome to Medicare Preventive Visit."
G0438
Annual Wellness Visit (AWV): includes a personalized prevention plan of service (PPPS), initial visit only.

Subsequent visit
G0439
Annual Wellness Visit (AWV): includes a personalized prevention plan of service (PPPS), all subsequent visits.

Coding Tips for Advance Care Planning with the Annual Wellness Visit

Advance Care Planning Codes
CPT 99497
Advance Care Planning: includes the explanation and discussion of advance directives (with completion of standard forms) when performed by the physician or other qualified health care professional; first 30 minutes, face-to-face with the patient, family member(s), and/or surrogate.
CPT 99498
Each additional 30 minutes (List separately in addition to code for primary procedure.)

*Health New England Medicare Advantage Plans will accept CPT code range 99381-99387 (new patient) and 99391-99397 (established patient). This is a head-to-toe physical exam to identify/determine if there are any problems.

Email general coding inquiries to radjust@hne.com. A member of Health New England's Risk Adjustment team will follow up with you directly.

Annual Wellness Visit Coding Tips

- G0438 and G0439 must not be billed within 12 months of a previous billing of a G0402, G0438 or G0439 for the same patient. Such subsequent claims will be denied.
- If a claim for a G0438 or G0439 is billed within the first 12 months after the effective date of the patient's Medicare Part B coverage, it will also be denied. A patient is only eligible for the "Welcome to Medicare" physical in the first 12 months of eligibility.
- When a provider performs a separately identifiable medically necessary E/M service in addition to the AWW with PPS, CPT codes 99201-99215 reported with a modifier 25 may also be billed to indicate a significant, separately identifiable evaluation and management [E/M] service was performed.**

***The emphasis of an Annual Wellness Visit will be on prevention and screening, NOT detection and diagnosis. Please make the patient aware, if you are addressing additional medical concerns during this visit, it will be subject to their primary care provider copay.*

What is included in the Annual Wellness Visit?

- Health risk assessment
- Establishment of medical/family history
- Establishment of list of current providers and suppliers
- Measurement of height, weight, BMI, blood pressure, and other medically necessary routine measurements
- Detection of any cognitive impairment
- Review of potential risk factors for depression
- Review of functional ability and level of safety
- Establishment of a written screening schedule
- Establishment of a list of risk factors and conditions for which interventions are recommended or are underway and a list of treatment options and their risks and benefits
- Furnishing of personalized health advice and referral, as appropriate, to health education or preventive counseling services or programs, or community-based lifestyle interventions to reduce identified risk factors and promote self-management and wellness
- Voluntary advance care planning upon agreement with patient
- Personalized Prevention Plan of Service (PPS)

Key Quality Measures

Also address the following questions with your patient:

- Is the patient's physical health better or improving in the past 2 years?
- Is the patient's mental health better or improving in the last 2 years?
- What is the patient's physical activity?
- What is the patient's fall risk?
- Does the patient have urinary incontinence?