

Medicare Annual Wellness Visit Training

7/31/2025



What is a Medicare Annual Wellness Visit?

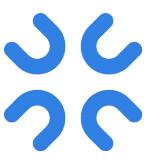


A Medicare Annual Wellness Visit (AWV) is a preventive health service covered by Medicare Part B once every 12 months (NOT ONCE A YEAR). The visit focuses on assessing health risks, updating medical history, and creating a personalized prevention plan to help prevent disease and disability.

Medicare also offers the Initial Preventive Physical Exam (IPPE), commonly referred to as the "Welcome to Medicare" visit, only allowed within the first 12 months on Medicare.

What's the Difference?

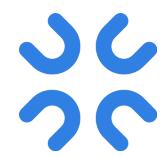
Medicare Annual Wellness Visit (AWV)	Routine (or Annual) Physical Exam
 Health Risk Assessment: Questions to evaluate a member's health status and risk factors, including social determinants of health, substance use, and other risks that can affect a member's overall health. 	 Must include comprehensive physical examination. Exam is not required as part of AWV, though some exam might still be done. May include screening blood work and imaging, as appropriate for the patient.
Clinical HRAs and Care Coordinator HRAs are different.	
Routine Measurements: Height, weight, blood pressure, and BMI	 While intended to be preventive, may still lead to new diagnoses if patient is having concerns.
 Medical & Family History Review: Identify changes in health history. Update list of current providers. 	Routine annual physicals are not a Medicare benefit.
 Screening Schedule: A personalized written checklist of recommended preventive services. 	 All our products do cover office visits to evaluate new or changing medical problems. These are not preventive services, so member cost sharing might apply.
Personalized Health Advice: Guidance on managing health risks.	
 Cognitive Assessment: Screening for signs of cognitive impairment, including dementia. 	
 Advance Care Planning: Discussion about future healthcare preferences, at the member's discretion. 	



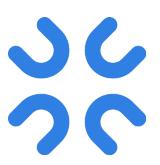
Why is preventive care important?

- ✓ These visits ensure dedicated time to focus on preventive care.
- ✓ These visits help members stay ahead of potential health risks and improve overall well-being.
- ✓ Periodic (or annual) visits with a continuity provider help build relationships with a primary care team.

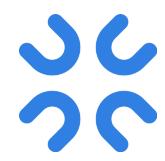
Early Detection of Health Issues can lead to earlier treatment. **Better Member Engagement Personalized** encourages more **Prevention Plan** active member role in health care. **Improved Access to Preventive Services, Medication & Care** such as vaccinations, Coordination screenings, and lifestyle counseling.



How do AWVs support Stars Ratings?



- Preventive Care Measures: Improve recommended screenings, vaccinations, and health assessments, which contribute to higher quality scores.
- <u>Patient Satisfaction</u>: Improve member engagement and satisfaction, influencing Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey scores, a key component of Star Ratings. This in turn leads to healthier outcomes for members.
- <u>Care Coordination</u>: AWVs allow providers to identify care gaps, update medications, and refer members to specialists, also improving health outcomes.
- Chronic Disease Management: Help detect and manage chronic conditions early, leading to better long-term health results.
- <u>Health Outcomes Survey (HOS) measures</u>: Some of the questions in the Medicare Annual Wellness Visit HRA correspond to the Health Outcome Survey (HOS) used in the Medicare Star Ratings program.



Monitoring Physical Activity

Evaluates
 whether
 healthcare
 providers
 encourage
 physical activity
 among older
 adults.

Improving Bladder Control

 Assesses how well providers help manage urinary incontinence.

Reducing the Risk of Falls

 Measures efforts to prevent falls among older adults.

Improving or Maintaining Physical Health

 Tracks changes in physical health over time.

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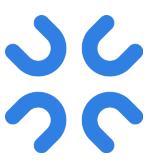
 Evaluates mental health stability and improvements.

What Tests are Done at Preventive Visits?



- Providers typically follow USPSTF Guidelines. Screening tests may vary based on age, sex, risk factors.
- UCare's website has a nice preventive services guide for IFP that can help other members as well - https://www.ucare.org/health-wellness/preventive-care/ifp-preventive-care.
- Labs might include blood sugar, cholesterol, prostate PSA, HIV, STI tests, pap smear.
- Imaging might include mammogram, bone density DXA test, aorta ultrasound, chest CT.
- Other screening might be ordered, like colon cancer tests.
- There are coverage rules related to frequency and patient characteristics.

What Else Might Happen?



- Immunization update
 - Examples: Flu, Covid-19, Pneumococcal, Shingles, Tetanus/Pertussis, RSV
- Screening for depression and anxiety
- Brief cognitive testing (clock test, mini mental)
- Counseling about smoking, diet, exercise, weight, alcohol and substance use

How to help a member schedule a preventive visit?



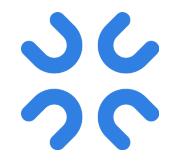
- Educate Member on Visit: Help the member understand the differences between preventive visits and regular office visits. Support them in scheduling the correct appointment type.
- <u>Check Member's Eligibility</u>: Medicare member's who have not had an AWV in over 12 months should schedule that. Those new to Medicare in past 12 months should tell provider that. Use the internal gap-in-care lists to verify if member needs an annual wellness visit.
- <u>Help Member Find a Provider</u>: Support the member in contacting their PCP (ideally) or a Medicare-approved provider. If support is needed to locate an in-network provider, please reach out to the Health Improvement team.
- <u>Help Member Call to Schedule</u>: For MSHO and Connect+, request a Medicare Annual Wellness Visit. For members without Medicare, request an annual physical.
- <u>Help Member Prepare for the Visit</u>: Recommend that the member bring a list of current medications and supplements to their appointment, as well as a list of all outside providers seen. Support member in setting up transportation and/or interpreter services if needed.

What About Other Health Concerns?



- Patients often want to also discuss their other chronic conditions and new concerns. Providers may or may not have the time to do this at the same visit.
- Members should expect that non-preventive care done during these visits can be billed separately and may have member cost sharing.
- Members should also be prepared that their provider may ask them to return separately to discuss new concerns or complex chronic conditions.
- The AWV or annual physical is NOT the intended place for members to get worked up for new problems.
- Members might also find that their provider may bring up preventive topics throughout the year during regular visits as well.

Questions?



Thank you!

