ONECARE ADULT ANNUAL WELLNESS VISIT

PROVIDER INSTRUCTIONS

The Annual Wellness Visit (AWV) is a whole-patient care approach to promote patients' self-management, wellness and engagement with their provider to develop an individualized care plan that fits their needs.

CalOptima Health's comprehensive AWV includes the following components:

- 1. Health risk assessment (HRA) patient's self-assessment of health status, psychosocial and behavioral risks, and activities of daily living (ADLs)
- 2. Patients' medical, surgical and family history
- 3. List of current providers and suppliers
- 4. Measurement of vitals
- 5. Detection of any cognitive impairments
- 6. Patient's written preventive screenings
- 7. List of risk factors and conditions (include chronic conditions statuses and treatment plan)
- 8. Personalized health advice and appropriate referrals to health education or preventive counseling services or programs (i.e., fall prevention, nutrition, physical activity, tobacco-use cessation, social engagement, weight loss and cognition)
- 9. Advance care planning (ACP) services at the patient's discretion
- 10. Review of current opioid prescriptions
- 11. Screenings for potential substance use disorders (SUDs) (refer to the DSM-5 criteria)
- 12. Social Determinants of Health (SDOH) Risk Assessment (optional)

Reference: CMS - MLN6775421 – Medicare Wellness Visits

Providers:

1. Schedule your OneCare (HMO D-SNP), a Medicare Medi-Cal Plan, member's face-to-face AWV anytime within the current calendar year (January 1–December 31). The best practice is to complete this visit at least six months from the member's last AWV.

2. Document all required components of a comprehensive AWV.

- Providers <u>with</u> an electronic health record (EHR) system:
 - Continue to document through your EHR system and ensure all required components of an AWV are documented in the member's medical record.
- Providers <u>with</u> an EHR <u>and</u> limited assessment tools:
 - o Continue to document through your EHR system.
 - Complete the necessary assessments to fulfill the required components of an AWV using the CalOptima Health OneCare AWV form.
 - \circ $\:$ Sign and date the bottom of the AWV form.
 - Submit your CalOptima Health OneCare AWV form via the Provider Portal or fax to **714-571-2491**.
- Providers <u>without</u> an EHR
 - o Complete the CalOptima Health OneCare AWV form and the necessary assessments in their entirety.
 - Sign and date the bottom of the AWV form.
 - Submit your CalOptima Health OneCare AWV form via the Provider Portal or fax to **714-571-2491**.

3. Submit appropriate claims and encounters for completing the AWV.

G0402 — Initial preventative physical exam (IPPE); face-to-face visit
G0438 — AWV, includes a personalized prevention plan (PPS), initial visit
G0439 — AWV, includes a PPS, subsequent visit
G0468 — Federally Qualified Health Center (FQHC) visit, IPPE/AWV

