

## PHP Adult ACA Annual Wellness Visit Program Requirements



### Acquire Member Information

Action	Element
Collect any self-reported data	<p>Address the following items from the collected data:</p> <ul style="list-style-type: none"> <li>• Demographic data</li> <li>• Self-Assessment of current/past health status</li> <li>• Psychosocial risks</li> <li>• Behavioral risks</li> <li>• Activities/Instrumentals of Daily Living (ADLs) if age appropriate,                             <ul style="list-style-type: none"> <li>○ Activities including but not limited to, dressing, bathing, walking, etc.</li> <li>○ Instrumentals including but not limited to, shopping, housekeeping, managing medications, handling finances</li> </ul> </li> </ul>
Establish a list of current providers	Include current providers that regularly provide medical care to the member
Establish the member's medical/family history	<p>At a minimum, collect and document the following:</p> <ul style="list-style-type: none"> <li>• Medical events of the member's parents, siblings, children, including diseases that may be hereditary or place the member at an increased risk</li> <li>• Past medical and surgical history, including experiences with illnesses, hospital stays, operations, allergies, injuries and treatments</li> <li>• Use of, or exposure to, medications and supplements, including calcium and vitamins</li> </ul>
Review the member's potential risk factors for depressing, including current or past experiences with depression or other mood disorders	Use any appropriate screening tool for member without a current diagnosis of depression, which you may select from various available standardized screening tests designed for this purpose and recognized by national professional medical organizations
Review the member's functional ability and level of safety (if age appropriate)	<p>Use direct observation of the member, or select appropriate screening questions or a screening questionnaire from various available screening questions or standardized questionnaires recognized by national professional medical organizations to assess, at a minimum, the following topics:</p> <ul style="list-style-type: none"> <li>• Ability to successfully perform ADLs</li> <li>• Fall risk</li> <li>• Hearing impairment</li> <li>• Home safety</li> </ul>

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### Begin Assessment

Action	Element
Assess	Obtain the following measurements: <ul style="list-style-type: none"> <li>• Height, weight, body mass index (or waist circumference, if appropriate), and blood pressure</li> <li>• Other routine measurements as deemed appropriate based on medical and family history</li> </ul>
Detect any cognitive impairment the member may have	Assess the member's cognitive function by direct observation, with due consideration of information obtained via member reports and concerns raised by family members, friends, caretakers, or others

### Counsel Member

Action	Element
Establish a written screening schedule for the member, such as a checklist for the next 5 to 10 years, as appropriate	Base written screening schedule on: <ul style="list-style-type: none"> <li>• Age-appropriate preventive services</li> <li>• Recommendations from the <u>United States Preventive Services Task Force (USPSTF)</u> and the <u>Advisory Committee on Immunization Practices (ACIP)</u></li> <li>• The member's current health status, screening history, and age-appropriate preventive services</li> </ul>
Establish a list of risk factors and conditions for which primary, secondary, or tertiary interventions are recommended or underway	Include the following: <ul style="list-style-type: none"> <li>• Mental health conditions</li> <li>• Risk factors or conditions identified through an IPPE</li> <li>• Treatment options and his/her associated risks and benefit</li> </ul>
Furnish personalized health advice to member and appropriate referrals to health education or preventive counseling services/programs	Include referrals to educational and counseling services/programs aimed at: <ul style="list-style-type: none"> <li>• Community-based lifestyle interventions to reduce health risks, promote self-management and wellness, including:               <ul style="list-style-type: none"> <li>○ Fall prevention</li> <li>○ Nutrition</li> <li>○ Physical activity</li> <li>○ Tobacco-use cessation</li> <li>○ Weight loss</li> </ul> </li> </ul>
Furnish, <b>at the discretion of the member</b> , advance care planning services	Include discussion about: <ul style="list-style-type: none"> <li>• Future care decisions that may need to be made</li> <li>• How the member can let others know about care preferences</li> <li>• Explanation of advance directives, which may involve the completion of standard forms</li> </ul>

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## Coding

### HCPC and Diagnosis Codes

Use the following codes to file claims for the PHP Adult ACA Wellness Visit:

- **HCPCS Codes**
  - G0438 - Annual Wellness visit, includes personalized prevention plan of service (PPS), initial visit
  - G0439 - Annual Wellness visit, includes personalized prevention plan of service (PPS), subsequent visit
- **Diagnosis Codes** – Report **all** appropriate diagnosis codes consistent with the member's exam. Be sure to code morbidities effecting the member's overall health and treatment plan.

Source: CMS The ABCs of Annual Wellness Visit (AWV)