



Telehealth Assistance Program Medicare Annual Wellness Visit Benefit Expansion Tip Sheet

- Telehealth AWV claims must include HCPCS G0438 or G0439 with a POS 02 (plus G0468)
- Provider should already have an established relationship with the patient
- Patient MUST virtually consent to using telehealth for a wellness visit and the consent must be documented in the medical record prior to the visit
- Visits are still only covered once per calendar year
- Medicare is allowing non-compliant platforms to conduct AWVs, they include:
 - Apple FaceTime
 - Skype
 - Facebook Messenger video chat
 - Standard telephone visit if video platforms are not available or accessible for the patient
 - Google Hangouts video
- Medicare COMPLIANT platforms include:

Skype for Business

Updox

Vsee

Zoom for Healthcare

Doxy.me

Google G Suite Hangouts Meet

Required Components of the Telehealth Annual Wellness Visit

Perform a Health Risk Assessment

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• Self-reported information includes demographics, self-assessment on health status, psychosocial risks, behavioral risks, ADLs and SDoH

Establish Medical and Family History

Review PMSH, recent ED or hospital stays, operations/procedures, allergies, injuries and treatments

• Establish a list of current providers and suppliers

Include current providers and suppliers that regularly provide medical care

Review Current Medications

Document patient's current medications including drug name, dosage, frequency and route

• Detect any cognitive impairment

Assess the cognitive function by direct observation, while considering information from reports and concerns raised by family, friends, caregivers and others

- Review potential risk factors for depression (include current and/or past experiences) or other mood disorders
- Review functional ability and level of safety

Assess at a minimum Fall Risk, Hearing Impairment, Home Safety

• Establish a list of risk factors and conditions for which primary, secondary or tertiary interventions are recommended or underway

Include: Mental Health conditions (depression, substance abuse/use disorder, and cognitive impairment, and treatment options and their risks and benefits

- Provide a personalized care plan to the patient
- Care plan should include recommended follow-up care, referrals for disease management programs, preventative screenings needed, community-based lifestyle interventions and other necessary services
- Optional: Advanced Care Planning Services including discussions about future care decisions
 that may be needed, how to notify other of care preferences, caregiver identification,
 explanation of advance directives which may involve the completion of standard forms