



# Medicare Annual Wellness Visit Note – Epic Updates

August 2024

# Why?

- Improve the usability of the Advance Care Planning section
- Address documentation gaps regarding:
  - Members of the patient's care team
  - Substance abuse screening (new Medicare guidelines issued recently)

# What are the changes?

- Information entered by the patient in MyChart has been moved to the top of the AWV note, under the Patient Care Team section
- New prompt for provider to confirm the completeness and accuracy of the care team

Patient Care Team:

Kenneth Ballew, MD as PCP - General (Internal Medicine)

Kenneth Ballew, MD as PCP - ATT PCP

Patient-reported Provider List:

Dr. Enamel for my teeth, and Dr. Specs for my eye care (crazy, right)

{TIP | Accuracy of the care team (including eye / dental) is critically important to the AWV documentation. Please carefully review the information above with the patient. No need to delete tips -- these do not file to the chart.:28216}

Current Providers: Medicare AWV Current Providers ▾

- accurate and complete to my knowledge
- patient only sees primary care provider
- patient sees other specialist but is unable to recall name of provider/clinic at this time.
- \*\*\*

\*Note\* we are working on improving the consistent use of the Care Team activity in Epic as the source of truth for this information. Better adoption of that tool will hopefully mean that we can remove this prompt as our information becomes more complete and accurate.

# Substance Use / Abuse

- If the patient is on the chronic opioid use registry, a required prompt will now be displayed as shown below:

## Substance Use:

Opioid Counseling Indicated ▾

- assessed patient's pain and current treatment plan, reviewed risks and benefits of opioid medications for chronic pain, and potential alternative treatments
- \*\*\*

If the patient is NOT on the chronic opioid use registry, you'll see the (existing) tip text below and can complete the documentation if indicated, this is not required and will disappear if not used after signing.

## Substance Use:

If the patient is currently taking opioids, please complete this section. If not, you can ignore it and it will disappear when you see the note. ▾

# Substance Use / Abuse continued

- The prior question was revised and separated into two separate questions. If either is answered 'Yes', the provider will be prompted to document how they've addressed it with the patient.

In the past 12 months have you used any prescription medications "recreationally" (for the feeling, or using more than prescribed)? : No  
In the past 12 months have you used any illegal drug or marijuana?| : Yes

How Addressed: Management ▾

- counseled regarding health lifestyle habits
- e-consult to addiction medicine
- additional screening performed (specify: \*\*\*)
- referred for treatment
- \*\*\*

# Alcohol Use

- The patient questionnaire was simplified by removing a redundant question (the ‘prescreen’ question shown below).

**Alcohol Use Prescreen**

Do you sometimes drink beer, wine, or other alcoholic beverages?

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- Now, the first question of the USAUDIT will be used to screen for any alcohol use, and this information will display in the ‘Substance Use’ section and the blank above will no longer be an issue.

# Advance Care Planning (ACP) Changes

1. Links to Advance Directive (AD) in both English and Spanish
2. Links to DDNR form, and the 'Intro to ACP' guide
3. Date of last scanned AD automatically displayed (VERIFIED only)
4. Updates to the 'Next Steps' question

## Advance Care Planning:

{TIP | Forms and Resources- Advance Directive ([english](#), [spanish](#)), [Durable DNR](#), [Intro to ACP](#). No need to delete tips -- these do not file to the chart.:2105700025

Does the patient have a Durable DNR? No

Does the patient have an Advance Directive or Living Will? (!) No

Date of last scanned Advance Directive: None found

Advance Directive / Advance Care Planning Next Steps: ACP Next Steps UVA ▾

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{TIP | To bill for ACP counseling ,use CPT 99497 (1st 30 min) or 99498 (each add

Advance Directive / Advance Care Planning Counseling: ACP Counseling UVA ▾

- Advance Directive in Epic is up to date and reflects the wishes of the patient
- Patient asked to complete/update AD and bring into clinic
- Discussed with patient and they will consider further, will revisit at next AWV
- Not discussed today
- \*\*\*

chart.:28216}

# ACP Section Changes and Health Maintenance – the ‘Next Steps’ question

- Advance Directive in Epic is up to date and reflects the wishes of the patient
- Patient asked to complete/update AD and bring into clinic
- Discussed with patient and they will consider further, will revisit at next AWV
- Not discussed today
- \*\*\*

Selecting this option will satisfy the HM topic ‘Advance Directive Status Review’, shown below

Advance Directive Status Review

Next due on 7/24/2025

2 year(s)

7/24/2023 (Done)



# ACP Counseling

- Drop-down options updated to match billing requirements

ACP Counseling UVA ▾

- I spent less than 16 minutes with the patient discussing advance care planning including the explanation and discussion of advance directives.
- I spent \*\*\* minutes with the patient discussing advance care planning including the explanation and discussion of advance directives.
- Not performed today

# For questions, contact:

- **Epic:** Jason Lyman, Spencer Dickson
- **Billing:** email Ask Professional Coding at [askupgacc@uvahealth.org](mailto:askupgacc@uvahealth.org)
- **General:** Becky Compton, Gina Engel, Jim Min