



Glencoe Regional Health Services

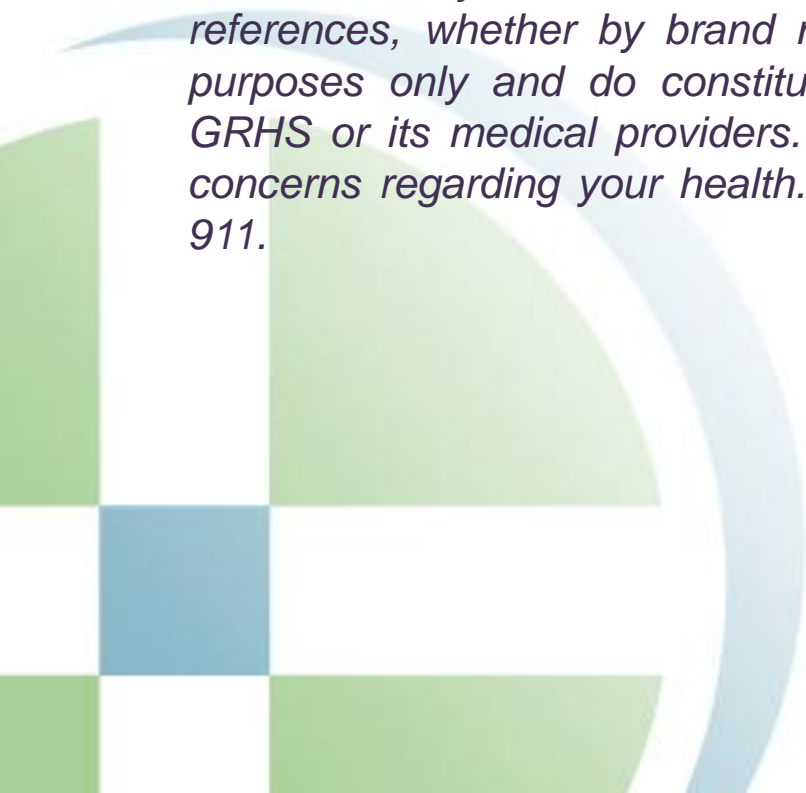
New Medicare Benefits for Annual Wellness Exams



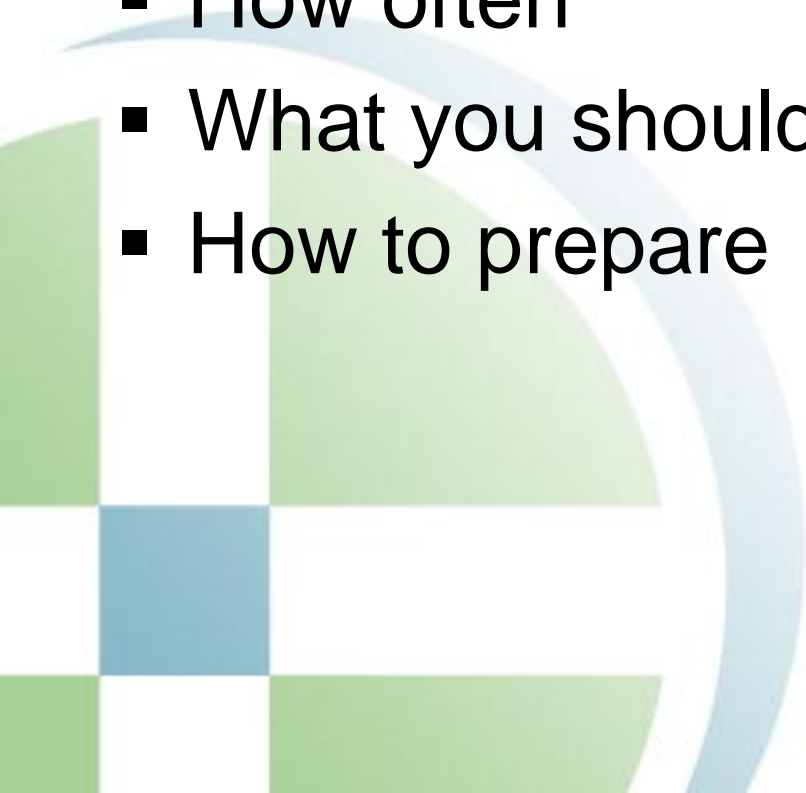
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Family Medicine
April 11, 2011

Important Notice

The information contained in this document is for informational purposes only. It is not intended to diagnose or treat specific patients and should not be used as a substitute for the medical care and advice of your health care provider. In addition, this document may contain references to specific products and/or medications. Such references, whether by brand name or generically, are provided for informational purposes only and do constitute endorsement, recommendation, or approval by GRHS or its medical providers. Always consult a medical professional if you have concerns regarding your health. If you are experiencing a medical emergency, dial 911.



Objectives

- What is included in exam
 - Which screening tests are covered
 - How often
 - What you should expect during the exam
 - How to prepare
- 

Affordable Care Act

1-1-11

- Congress expanded preventive care benefits covered under Medicare Part B.
- Hope that the new benefit will lead to increased utilization of the preventive services covered in Part B.
- Medicare will waive the deductible and copay to cover 100% on recommended services.

Three different types of visits

- Initial Welcome to Medicare Physical
- Initial Annual Wellness Visit
- Subsequent Annual Wellness Visit

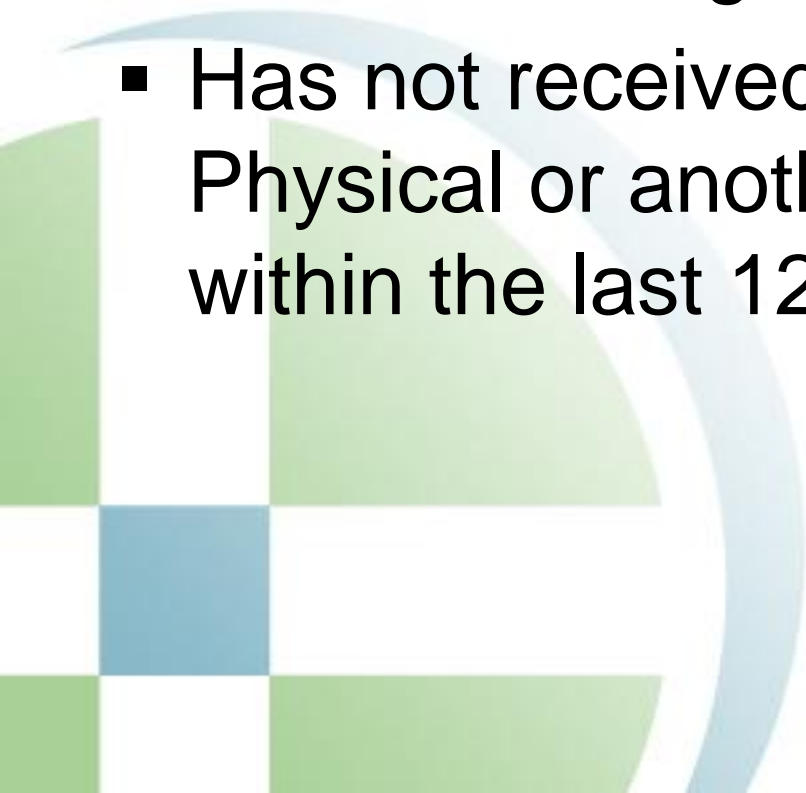


Initial Welcome to Medicare Physical

- Initial Preventive Physical Exam (IPPE)
 - Performed within the first 12 months of Medicare B eligibility
 - For new Part B beneficiaries
 - Starts the first of the month they turn 65 (if birthday on the first, start first of prior month)
 - These are covered exams with no need to meet deductible or copay
 - Must schedule as a “Physical” to allow time

Initial Annual Wellness Visit

- A patient who is no longer within 12 months after the effective date of Medicare Part B coverage
- Has not received the Initial Preventive Physical or another Annual Wellness Visit within the last 12 months



Subsequent Annual Wellness Visit

- A patient that has had an initial Annual Wellness Visit greater than 12 months ago.
- Coverage began greater than 12 months prior to date of service.



Welcome to Medicare Physical Initial Preventive Physical Exam (IPPE)

- Past Medical History
 - Illnesses
 - Hospital stays
 - Injuries
 - Chronic diseases

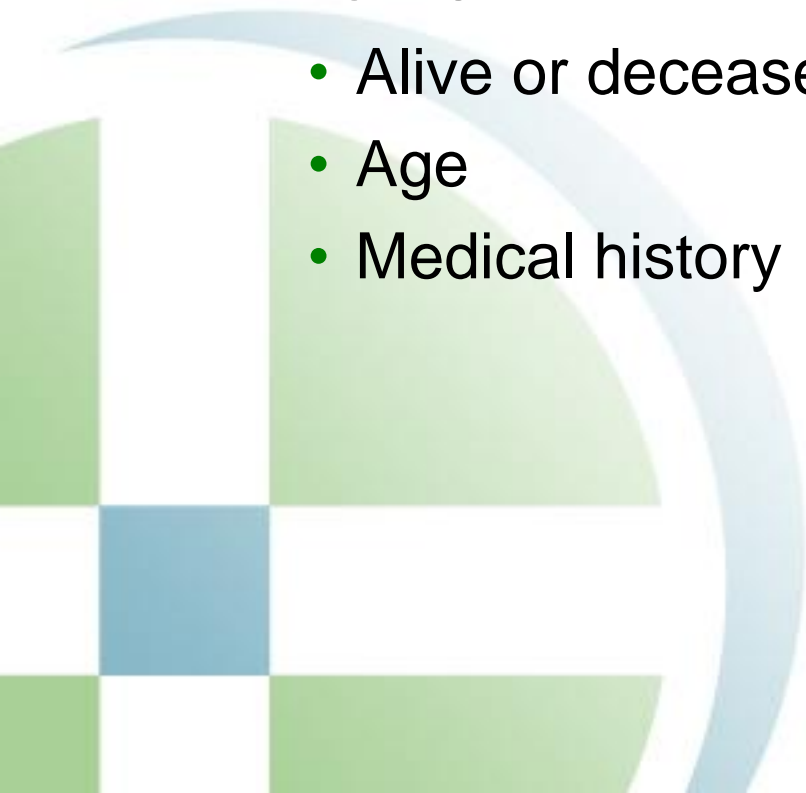


IPPE

- Past Surgical History
 - Current Medications
 - Prescribed
 - Supplements
 - OTC
 - Allergies
 - Drugs
 - Environmental
- 

IPPE

- Family History
 - Mother
 - Alive or deceased
 - Age
 - Medical history



IPPE

– Father

- Alive or deceased
- Age
- Medical history



IPPE

-Siblings

– Brothers and Sisters

- How many, their ages, medical history



Social History

- Married, Single, Widowed, Divorced
- Tobacco use?
 - Current
 - Prior
 - When did you quit?
 - How many Pack-years?
 - Type?

Social History

- ETOH
 - Caffeine
 - Drug Abuse
 - Occupation
 - Exercise
 - Diet
 - Home Environment
- 

Social History

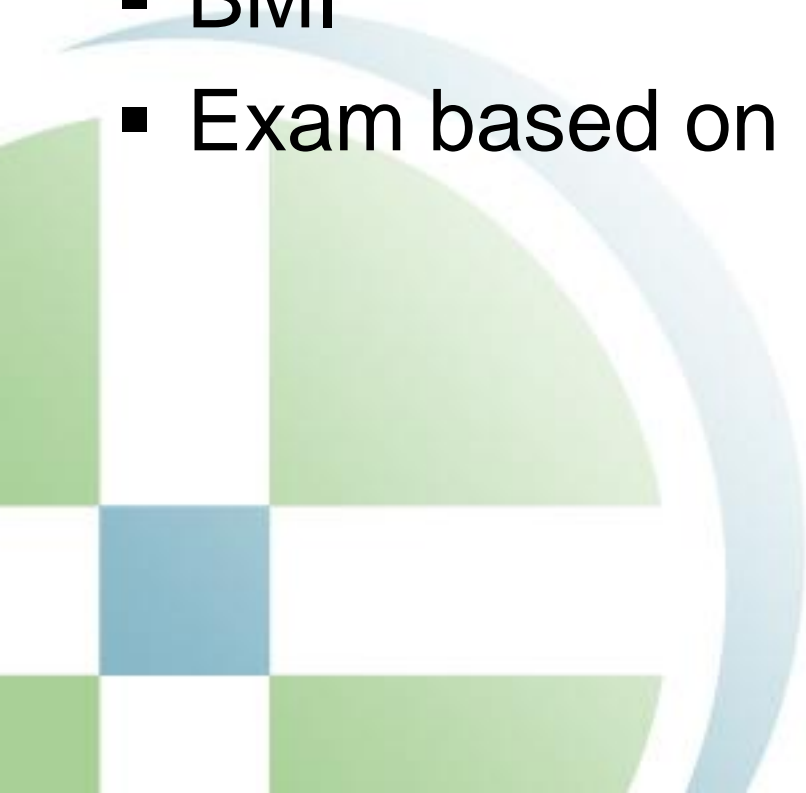
- Risk for Depression
 - PHQ-9
 - Felt down, depressed, or hopeless
 - Little interest in doing social activities



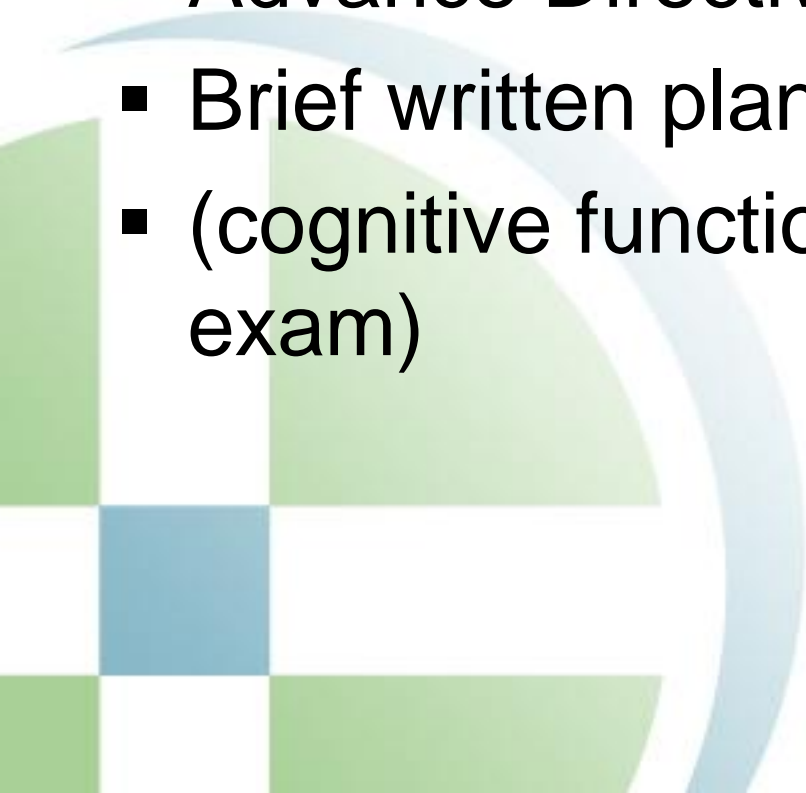
Social History

- Functional Ability
 - Hearing Impairment
 - Activities of daily living
 - Falls risk
 - Balance
 - Get up and go
 - Home Safety
 - Rugs
 - Grab bars

Physical Exam

- Height, Weight, Blood Pressure
 - Visual Acuity
 - BMI
 - Exam based on medical and social history
- 

Counseling

- Education, counseling and referral, as appropriate.
 - Advance Directive instructions
 - Brief written plan of action
 - (cognitive function is not required in this exam)
- 

Initial Preventive Physical Exam Encounter Form

COUNSELING AND REFERRAL OF OTHER PREVENTIVE SERVICES		REC.	Sched.
Service	Limitations		
Vaccines <ul style="list-style-type: none"> • Pneumococcal • Influenza • Hepatitis B (if medium/high risk) 	No deductible/no co-pay Medium/high-risk factors: <ul style="list-style-type: none"> • End-stage renal disease • Patients with hemophilia who received Factor VIII or IX concentrates • Clients of institutions for the mentally retarded • Persons who live in the same house as a carrier of Hepatitis B virus • Homosexual men • Abusers of illicit injectable drugs 		
Mammogram			
Pap and pelvic exams			
Prostate cancer screening <ul style="list-style-type: none"> • Digital rectal exam (DRE) • Prostate specific antigen (PSA) 			
Colorectal cancer screening <ul style="list-style-type: none"> • Fecal occult blood test • Flexible sigmoidoscopy • Screening colonoscopy • Barium enema 	Exempt from Part B deductible.		
Diabetes self-management training	Requires referral by treating physician for patient with diabetes or renal disease.		
Bone mass measurements	Requires diagnosis related to osteoporosis or estrogen deficiency.		

Initial Preventive Physical Exam Encounter Form Cont.

		REC.	Sched.
Glaucoma screening			
Medical nutrition therapy for diabetes or renal disease	Requires referral by treating physician for patient with diabetes or renal disease.		
Cardiovascular screening blood tests <ul style="list-style-type: none"> • Total cholesterol • High-density lipoproteins • Triglycerides 	Order as a panel if possible.		
Diabetes screening tests <ul style="list-style-type: none"> • Fasting blood sugar (FBS) or glucose tolerance test (GTT) 	Patient must be diagnosed with one of the following: <ul style="list-style-type: none"> • Hypertension • Dyslipidemia • Obesity (BMI ≥ 30 kg/m²) • Previous ID of elevated impaired FBS or GTT ... or any two of the following: <ul style="list-style-type: none"> • Overweight (BMI ≥ 25 but < 30) • Family history of diabetes • Age 65 years or older • History of gestational diabetes or birth to baby weighing more than 9 pounds 		
Abdominal aortic aneurysm screening <ul style="list-style-type: none"> • Sonogram 	Patient must be referred through IPPE and not have had a screening for abdominal aortic aneurysm before under Medicare. Limited to patients who meet one of the following criteria: <ul style="list-style-type: none"> • Men who are 65-75 years old and have smoked more than 100 cigarettes in their lifetime • Anyone with a family history of abdominal aortic aneurysm • Anyone recommended for screening by the U.S. Preventive Services Task Force 		

Annual Wellness Visit

- Review PMFSH
- Review risk for Depression
- Review Functional Abilities
 - Hearing
 - Falls risk
 - Home Safety

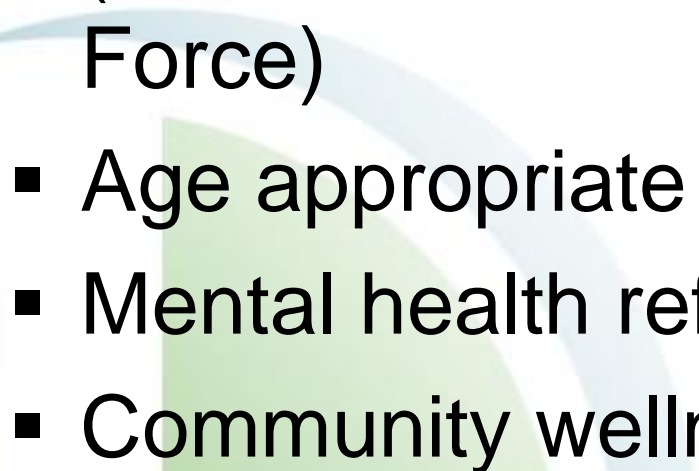


Annual Wellness Visit

- Exam
 - Height, Weight, BMI
 - Other routine measurements, as deemed appropriate, based on medical and family history

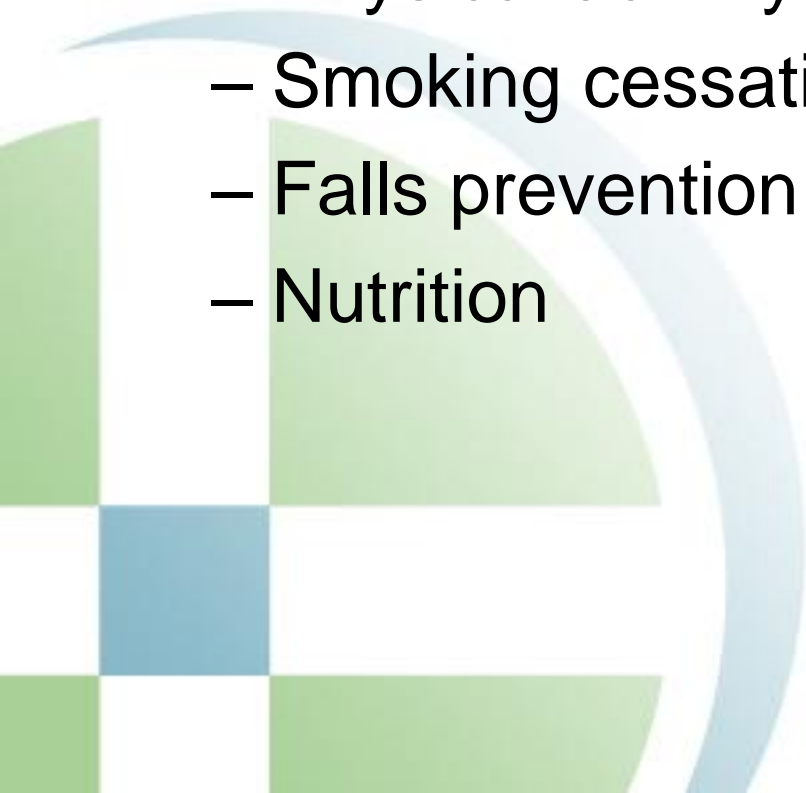


Annual Wellness Visit

- Establish a written screening schedule/checklist for the next 5 years (United States Preventive Services Task Force)
 - Age appropriate covered services
 - Mental health referrals
 - Community wellness
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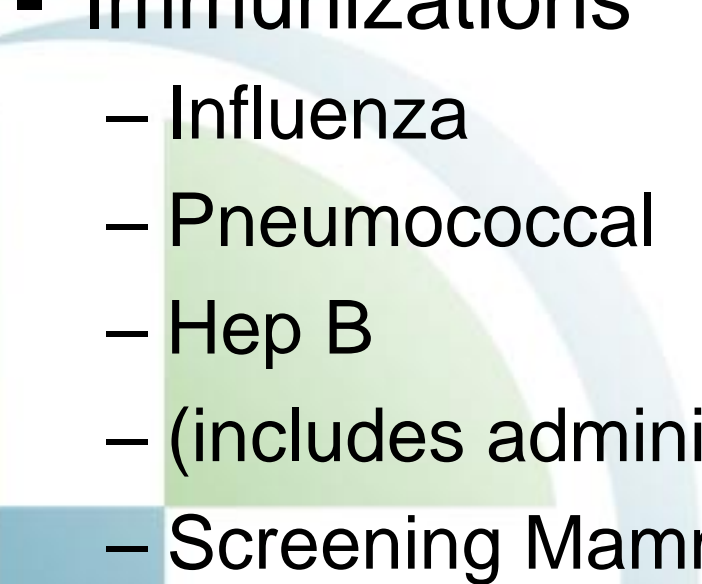
Annual Wellness Visit

- Community wellness
 - Weight loss
 - Physical activity
 - Smoking cessation
 - Falls prevention
 - Nutrition



Annual Wellness Visit

- IPPE
- BMI
- Cardiovascular Screening Tests
- Colorectal Screening Tests
- Smoking Counseling
- Diabetes Screening
- Diabetes Self Management
- HIV Screening

- 
- Medical Nutrition Therapy
 - Prostate Cancer Screening
 - Immunizations
 - Influenza
 - Pneumococcal
 - Hep B
 - (includes administration of the vaccine)
 - Screening Mammogram

- Screening Pap and Pelvic Exam
 - Every 24 months except if high risk up to age 70 (after 70 if abnormal in last 10 years or unknown history)



Counseling and Referral of Other Preventive Services Form

SERVICE	LIMITATIONS	RECOMMENDATION	SCHEDULED
<p><i>Vaccines</i></p> <ul style="list-style-type: none"> • Pneumococcal (once after 65) • Influenza (annually) • Hepatitis B (if medium/high risk) 	<p>Medium/high risk factors: End-stage renal disease Hemophiliacs who received Factor VIII or IX concentrates Clients of institutions for the mentally retarded Persons who live in the same house as a HepB virus carrier Homosexual men Illicit injectable drug abusers</p>		
<p><i>Mammogram (biennial age 50-74)</i></p>	<p>Annually (age 40 or over)</p>		
<p><i>Pap and pelvic exams (up to age 70 and after 70 if unknown history or abnormal study last 10 years)</i></p>	<p>Every 24 months except high risk</p>		
<p>Prostate cancer screening (annually to age 75)</p> <p>Digital rectal exam (DRE)</p> <p>Prostate specific antigen (PSA)</p>	<p>Annually (age 50 or over), DRE not paid separately when covered E/M service is provided on same date</p>		

Counseling and Referral of Other Preventive Services Form Cont.

<p>Colorectal cancer screening (to age 75)</p> <ul style="list-style-type: none"> • Fecal occult blood test (annual) • Flexible sigmoidoscopy (5y) • Screening colonoscopy (10y) • Barium enema 			
<p>Diabetes self-management training (no USPSTF recommendation)</p>	<p>Requires referral by treating physician for patient with diabetes or renal disease. 10 hours of initial DSMT sessions of no less than 30 minutes each in a continuous 12-month period. 2 hours of follow-up DSMT in subsequent years.</p>		
<p>Bone mass measurements (age 65 & older, biennial)</p>	<p>Requires diagnosis related to osteoporosis or estrogen deficiency. Biennial benefit unless patient has history of long-term glucocorticoid tx or baseline is needed because initial test was by other method.</p>		
<p>Glaucoma screening (no USPSTF recommendation)</p>	<p>Diabetes mellitus, family history African American, age 50 or over Hispanic American, age 65 or over</p>		
<p>Medical nutrition therapy for diabetes or renal disease (no recommended schedule)</p>	<p>Requires referral by treating physician for patient with diabetes or renal disease. Can be provided in same year as diabetes self-management training (DSMT), and CMS recommends medical nutrition therapy take place after DSMT. Up to 3 hours for initial year and 2 hours in subsequent years.</p>		

Counseling and Referral of Other Preventive Services Form Cont.

SERVICE	LIMITATIONS	RECOMMENDATION	SCHEDULED
<p><i>Cardiovascular screening blood tests (every 5 years)</i></p> <ul style="list-style-type: none"> • Total cholesterol • High-density lipoproteins • Triglycerides 	<p>Order as a panel if possible.</p>		
<p><i>Diabetes screening tests (at least every 3 years, Medicare covers annually or at 6-month intervals for prediabetic patients)</i></p> <ul style="list-style-type: none"> • Fasting blood sugar (FBS) or glucose tolerance test (GTT) 	<p>Patient must be diagnosed with one of the following:</p> <ul style="list-style-type: none"> • Hypertension • Dyslipidemia • Obesity (BMI ≥ 30 kg/m²) • Previous elevated impaired FBS or GTT <p>... or any two of the following:</p> <ul style="list-style-type: none"> • Overweight (BMI ≥ 25 but < 30) • Family history of diabetes • Age 65 years or older • History of gestational diabetes or birth of baby weighing more than 9 pounds 		
<p><i>Abdominal aortic aneurysm screening (once)</i></p> <ul style="list-style-type: none"> • Sonogram 	<p>Patient must be referred through IPPE and not have had a screening for abdominal aortic aneurysm before under Medicare. Limited to patients who meet one of the following criteria:</p> <ul style="list-style-type: none"> • Men who are 65-75 years old and have smoked more than 100 cigarettes in their lifetime • Anyone with a family history of abdominal aortic aneurysm • Anyone recommended for screening by the USPSTF 		

Counseling and Referral of Other Preventive Services Form Cont.

<p><i>HIV screening (annually for increased risk patients)</i></p> <ul style="list-style-type: none"> • HIV-1 and HIV-2 by EIA, ELISA, rapid antibody test or oral mucosa transudate 	<p>Patient must be at increased risk for HIV infection per USPSTF guidelines or pregnant. Tests covered annually for patients at increased risk. Pregnant patients may receive up to 3 tests during pregnancy.</p>		
<p><i>Smoking cessation counseling (up to 8 sessions per year)</i></p> <ul style="list-style-type: none"> • Counseling greater than 3 and up to 10 minutes • Counseling greater than 10 minutes 	<p>Patients must be asymptomatic of tobacco-related conditions to receive as a preventive service.</p>		
<p><i>Subsequent annual wellness visit</i></p>	<p>At least 12 months since last AWV</p>		



- AAA screening

**Exclusions that would have deductible applied and copay applicable

- Digital Rectal exams for Prostate Screening
- Glaucoma Screening
- Diabetes Outpatient Self-Management Training
- Barium Enemas

Summary

- Welcome to Medicare Exam
- Initial Annual Wellness Exam
- Subsequent Annual Wellness Exam
 - *No copay or deductible if you follow the guidelines
 - Goal is screening and prevention

Handout

Medicare Preventive Services Checklist

Take this checklist to your health care provider and ask which preventive services are right for you. You can also track your preventive services online at www.MyMedicare.gov. Get a two-year calendar of the Medicare-covered tests and screenings you're eligible for, and print a personalized "on the go" report to take to your next doctor's appointment, all through the MyMedicare.gov web site.

Medicare Covered Test/Screening/Service	Date You Got This Test/Screening/Service	Next Test/Screening Service Due
Abdominal Aortic Aneurysm Screening		
Bone Mass Measurement		
Cardiovascular Screening		
Colorectal Cancer Screening		
Fecal Occult Blood Test		
Flexible Sigmoidoscopy		
Colonoscopy		
Barium Enema		
Diabetes Screening		
Diabetes Self-management Training		
Flu Shot		
Glaucoma Test		
Hepatitis B Shot		
HIV Screening		
Mammogram		
Medical Nutrition Therapy Services		
Pap Test and Pelvic Exam (includes breast exam)		
"Welcome to Medicare"		
Physical Exam: Yearly "Wellness" exam		
Pneumococcal Shot		
Prostate Cancer Screening		
Smoking Cessation Counseling		

Handout

Welcome to Medicare!

What is the "Welcome to Medicare" physical exam?

A one-time free and easy benefit that helps you and your doctor plan for your health.

The "Welcome to Medicare" physical exam helps you and your doctor develop a personalized plan to prevent disease, improve your health, and help you stay well. A few things you should know:

- It's free. There's no copayment or deductible for the exam.
- It's easy to use this benefit. Just call your doctor when you sign up for Medicare. If you don't have a doctor, visit our directory of providers.
- You can get the exam during the first 12 months you have Medicare. After the first year, you can get a yearly "Wellness" exam for free.
- It's comprehensive. The exam includes a review of your medical history; preventive tests and screenings; and planning for a healthy future.
- The exam is covered by Original Medicare (Part B) and Medicare Advantage Plans. Under the new healthcare law, the exam is now free to those with Original Medicare, and to most people with Medicare Advantage Plans, along with a number of preventive screenings and services (like mammograms and colonoscopies).

What should I expect during the exam?

A comprehensive physical and evaluation of your medical history.

During the exam, your doctor will:

- Record and evaluate your medical and family history, current health conditions, and prescriptions.
- Check your blood pressure, vision, weight, and height to get a baseline for your care.
- Make sure you're up-to-date with preventive screenings and services, such as cancer screenings and shots.
- Order further tests, depending on your general health and medical history.

Following the exam, your doctor will give you a plan or checklist with free screenings and preventive services that you need.

What should I bring to my "Welcome to Medicare" physical exam?

Medical records, family health history and a list of prescription drugs.

- Medical records, including immunization records. Even if your current doctor does the exam, gather as much medical information as you can to make sure nothing is overlooked.
- Family health history. Try to learn as much as you can about your family's health history before your appointment. The information will help you and your doctor better understand what screenings you should get and what to watch for in the future.
- Prescription drugs. Bring a list of any prescription drugs, over-the-counter drugs, vitamins, and supplements that you currently take, how often you take them, and why.

Handout

Get Your "Welcome to Medicare" Physical Exam Questions Answered

What is the "Welcome to Medicare" physical exam? Why should I get it?

The "Welcome to Medicare" physical exam puts you in control of your health and your Medicare from the start. Offered the first year that you have Medicare, this comprehensive exam is an easy way for you and your doctor to take a good look at your health now, and plan for a healthy future. And it's free.

What's covered during the exam?

During the exam, you and your doctor will review your medical and family history, discuss your current health conditions and prescriptions, and do tests and screenings to get a baseline for future, personalized care. It's also a chance for you and your doctor to discuss short- and long-term steps to prevent disease, improve your health, and stay well. After the exam, your doctor will give you a plan or checklist outlining the screenings and preventative services you should get.

How much does the "Welcome to Medicare" physical exam cost?

The "Welcome to Medicare" exam is free for most people with Medicare.

I have a Medicare Advantage Plan. Can I still get the "Welcome to Medicare" physical exam?

Yes. The "Welcome to Medicare" physical exam is available to people who are in Medicare Advantage Plans. Check with your plan to find out if the exam will be free for you.

If my doctor already knows my health history, what's the benefit of this exam?

Enrolling in Medicare is an important step in your health care. The "Welcome to Medicare" physical exam is more comprehensive than a typical annual exam and allows for you and your doctor to discuss short- and long-term steps to prevent disease, improve your health, and stay well. It's also time to make sure that your health care wishes are carried out in the future.

What types of health care providers can perform the "Welcome to Medicare" physical exam?

A doctor or a qualified non-physician practitioner (like a physician's assistant, nurse practitioner, or clinical nurse specialist), can perform the "Welcome to Medicare" physical exam.

How long do I have to get the "Welcome to Medicare" physical exam after I enroll in Medicare?

The "Welcome to Medicare" physical exam is offered during the first 12 months that you have Medicare. Once you enroll in Medicare, it's important to schedule your "Welcome to Medicare" physical exam right away.

What if I've had Medicare longer than 12 months. Can I still get the "Welcome to Medicare" physical exam?

No. After the 12-month period has passed, you will need to schedule your visit as a yearly "Wellness" exam instead of the "Welcome to Medicare" physical exam.

Should I do anything to prepare for the exam? Do I need to bring anything with me?

To make the most of your "Welcome to Medicare" physical exam, you should bring the following things with you:

- Medical records, including immunization records
- Family health history – before your appointment, try to learn as much as you can about your family's health history. Any information you can give your doctor can help determine if you're at risk for certain diseases
- A list of prescription drugs and over-the-counter medications that you currently take, how often you take them and why

My doctor hasn't mentioned the "Welcome to Medicare" physical exam. Should I ask him/her?

If you enrolled in Medicare within the last 12 months, you should ask your doctor about the "Welcome to Medicare" physical exam. The exam puts you in control of your health and your Medicare from the start. It's an easy way for you and your doctor to take a good look at your health now, and plan for a healthy future.

Where can I get more information about the "Welcome to Medicare" physical exam?

www.medicare.gov/welcometomedicare/exam.html or call 1-800-MEDICARE (TTY/TDD users can call 1-877-486-2048) to get more information about the "Welcome to Medicare" physical exam.

Questions?



- Thank You

