



Annual Health Assessment (AHA)

Hoag Physician Partners Reference Document

Who:

All Medicare Advantage HMO Patients

Why:

The AHA aims to provide patients with a comprehensive visit that will improve the patient experience and assessment of appropriate risk adjustment codes and allow for better quality of care outcomes. The AHA can be conducted by one of Hoag Clinic's Embedded Nurse Practitioners or patient's PCP.

- The AHA is an annual face-to-face visit for our Medicare Advantage HMO patients. The goals for this visit are:
 - Every Hoag Clinic Medicare Advantage HMO patient to be seen for this visit annually.
 - Prioritize new members and members with outstanding Quality and HCC gaps.
 - Video visits apply only to those conducted by patient's assigned PCP; Hoag Clinic Embedded Nurse Practitioner can only see patients in office.
- Providers can discuss a patient's current health issues, identify developing issues, and close any open risk and quality gaps for the year.
- The AHA is designed to provide a complete visit experience for the patient in the hopes of strengthening the bond between Hoag and its patients to drive greater loyalty and patient satisfaction.
- **The current AWV workflow will stay in place for your Medicare Advantage PPO and Medicare Part A/B patients.*

What:

Timing and Scheduling Expectations

- The AHA program launches on January 1st and will continue throughout the year ending December 31st.
- A postcard and letter will be sent to all Hoag Clinic Medicare Advantage HMO members informing them of the opportunity to schedule an AHA with the Embedded Nurse Practitioner or PCP.
- Please be sure to encourage patients to schedule this comprehensive visit with the Embedded Nurse Practitioner.

Visit Expectations

- Review patient's AHA questionnaire/visit template and Mini Cog.
- Conduct Depression Questionnaire (PHQ-9).
 - Questionnaire should be done in office, not mailed or emailed to patient.
 - If patient scores greater than 3 on PHQ-2, then PHQ-9 is required.
- Check Cozeva during visit and address any open quality and HCC gaps. Close gaps with appropriate documentation.
 - If patient has completed quality measure(s), document in progress notes the date of most recent screening. If possible, include a copy of the screening report/results.
 - If patient has not completed quality measure(s), place appropriate orders and/or referrals or request that PCP place referrals.

- Visit CPT Codes

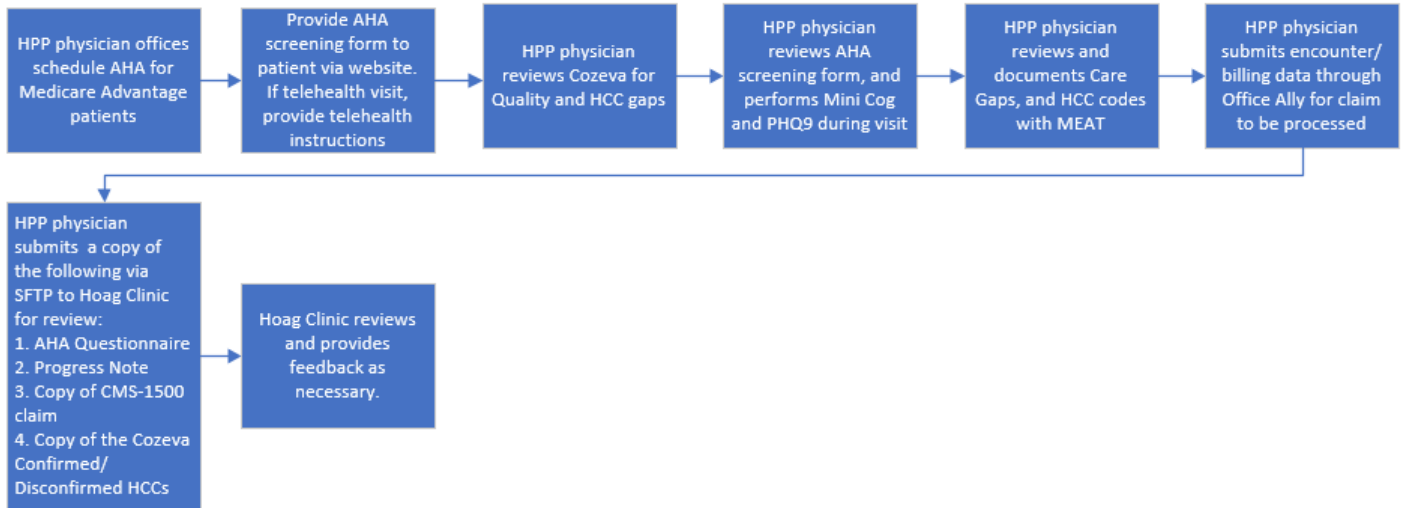
CPT Code	Description
99386	New Medicare Advantage Patient for AHA, 40-64
99396	Established Medicare Advantage Patient for AHA, 40-64
99387	New Medicare Advantage Patient for AHA, 65+
99397	Established Medicare Advantage Patient for AHA, 65+

- 99387 / 99386 (New Patient): A new patient is one who has not been seen within the last three years by assigned PCP or another physician of the same specialty in the same practice, regardless of insurance coverage.
- 99397 / 99396 (Established Patient): If patient has been previously seen within the previous three years by assigned PCP, or another physician of the same specialty in your practice, regardless of insurance coverage.
 - Visits conducted by patient’s PCP: Provider’s office must submit the following to Hoag Risk Adjustment for review; The AHA Questionnaire, a copy of the progress note corresponding to the AHA date of service, a copy of the claim form (CMS-1500), and a copy of the Cozeva confirmed/disconfirmed HCCs (located via Cozeva Supplemental Data tool).
 - Visits conducted by Embedded Nurse Practitioner: Provider’s office does not need to submit additional documentation.

AHA Reference materials located here: www.hoag.org/hpp/hpp-resources

Workflows:

Visits conducted by patient's PCP:



Visits conducted by Hoag Clinic Embedded Nurse Practitioner:

