



## From Peggy O’Neal, MPH, Ph.D., Director, Population Health Sales and Network Development



Welcome to the December edition of the SQCN/SACO newsletter, *Inside Population Health*. We are focusing on vaccines and prevention, especially during flu, COVID-19, and now, RSV season. We are looking at feelings of depression and isolation that may occur around the holidays. In addition, the importance of starting patient annual wellness visits at the beginning of the year. This helps your practice get on top of health issues that can be prioritized.

Our measures include the annual wellness visit, flu shot, diabetes management, depression screening and follow-up, depression readmission at 12 months, and utilization of the PHQ-9 to monitor depression symptoms.

### **Introducing the Population Health Sales and Network Development Department**

Our new department is here to strengthen the existing SQCN and SACO networks. I came to Sentara Health with over 20 years of healthcare experience. This includes eight years of building networks for managed care, public health with end stage renal disease emphasis, and accountable care organizations. I look forward to making the SQCN and SACO network one you can continue to be proud of—and depend on—to take your practice to the next level.

A few goals:

- **Get to know your practice.** We will set up individual meetings to find out what is needed and what you would like to see reimaged.
- **We won't reinvent the network—just make it smoother.** This includes making SQCN as seamless as possible and bringing those interested SQCN providers into SACO.
- **When you need resources from Population Health, you now have a dedicated team.** We will help you continue to help your practice meet your patients where they are.

As a current network provider, you don't need to do anything to benefit. Look for an email or a phone call for an in-person meeting. We will be making an initial contact to a few practices and physicians to get a pulse on the needs, wants, and thoughts around SQCN and SACO. This will be followed by a broader outreach to all SQCN physicians and clinicians.

If you have any questions in the meantime, feel free to reach out [via email](#) at or phone at 757-252-3556 (office) or 704-456-8944 (mobile).

Wishing the best for you and yours during the holiday season.

### **SQCN December 2023 Primary Care Meetings\***

- The Adult PCPC meeting will be on December 12 from 6-7:30 p.m. Dr. Moss Mendelson, Dr. Rick Bikowski, and Dr. Dan Dickinson will give a year-end review. Meeting link [here](#).
- The Pediatric PCPC is cancelled for the holidays and will resume in January 2024. **Thank you to Dr. Drusilla Powell for her incredible leadership as Chair of the SQCN Pediatric PCPC since October 2019!**

### **SQCN December 2023 Practice Managers Meeting\***

- The meeting is on December 13 from 12:15-1 p.m. Meeting link [here](#).

### **SACO December 2023 Primary Care Leadership Meeting**

- The monthly meeting is on December 15 at 7 a.m. Discussion includes a beneficiary notice update, advisement on MIPS for 2023, and scheduling the AWW in the new year.

\*No preregistration is necessary, simply join the links above. Click on the button below to access the 2023 meeting schedule and information.

2023 SQCN Primary Care Engagement Bonus Meetings

## SQCN Impact Scorecards

This [link](#) will take you to your monthly 2023 Adult and Pediatric Practice Impact Scorecard. Please be sure to check back monthly for your practice performance.

Avoidable ED visits (rate per 1,000) remain as our utilization metric and there are several quality metrics for adult and pediatric populations. These metrics are scored for each practice and the total score is expressed as a percentage from 30-100%. That Performance score will be combined with attribution to determine distributions. The report will be updated monthly so that you can track your practice's performance.

See the button below for more information about the Impact Scorecard and the SQCN distribution plan.

Please contact [SQCN@sentara.com](mailto:SQCN@sentara.com) if you have any questions.

Impact Scorecards SBAR

## HCC/Coding Tip : Annual Wellness Visit (AWV)

See the chart below for how to successfully code for the AWV.

Annual Wellness Visit Type	Traditional Medicare	SHP/Humana MA Plans	Tips for Success
Initial Preventive Physical Examination (IPPE) Welcome to Medicare Physical (Epic/CPT Code) 990402/G0402  (Using Extended HRA template is a great resource to ensure all required components are met)	Covered once within 12 months of Part B enrollment	Covered once within 12 months of Part B enrollment	<ol style="list-style-type: none"> <li>1. Family Hx must be included or list as "unknown."</li> <li>2. Must include visual acuity screening.</li> <li>3. Documentation of diet and physical activity under social history.</li> <li>4. A once-in-a-lifetime screening electrocardiogram (ECG/EKG).</li> </ol>
Annual Wellness Exam (Epic/CPT Code) 990438/G0438	Schedule 11-12 months from their last IPPE AWW, within 1-2 years of Medicare enrollment. **AWV must be done the same calendar month as the prior year.	Once in a calendar year, within 1-2 years of Medicare enrollment	***PHE ended 5/11/23. All telehealth AWW's must include documentation of weight/BMI and blood pressure reading.
Annual Wellness Exam (Subsequent) (Epic/CPT Code) 990439/G0439	Schedule 11-12 months from their last AWW. **AWV must be done the same calendar month as the prior year.	Once in a calendar year	***PHE ended 5/11/23. All telehealth AWW's must include documentation of weight/BMI and blood pressure reading.

More tips for success:

- **An (E/M) problem-oriented visit is allowed during the AWW.** In the medical record you must support that the E/M service is significant and separately identifiable.
  - Don't forget to add modifier 25 on your E/M.
- **Preventive Exam from SHP and Humana Medicare** includes the following:
  - One is allowed once per year.
  - On same day as AWW 99381-99397 with modifier 25.
- **Advance Care Planning** can be done at the time of the AWW.
  - Bill 99497 for the first 30 minutes.
  - Bill 99498 for each additional 30 minutes.
- **Counseling to Prevent Tobacco Use** can be done two times per year for patients that use tobacco, regardless of whether they exhibit signs or symptoms of tobacco-related disease.
  - Bill 99406 (3-10 minutes).
  - Bill 99407 (greater than 10 minutes).

There is a known challenge in the practice when the patient gets Medicare under the age of 65 and/or they are new to your office. Often looking at their Medicare card can help identify effective date of part B to help identify which wellness visit

is due. Or if your front office staff signs up for eligibility look-up with CMS, you can also obtain this information.

### **Innovative Practice: The Annual Wellness Visit (AWV) at Sentara Family Medicine Physicians at First Colonial**

Getting patients in for their AWV can be difficult. Add the extra challenge of making those visits more evenly spaced and not all at year end. The Sentara Family Medicine Physicians practice in Virginia Beach has found a way to meet the goals of both their patients and their staff.

Here are some best practices:

- **Make the AWV a team approach, with a culture of “working” the list.** The manager downloads the Tableau list of Medicare patients that are due. From there, a red dot on the schedule signifies the need for an AWV and is a clear mark to all staff. This allows multiple touchpoints to make sure the visit is scheduled.
- **Consider the virtual visit.** This works well if the patient has been in the office recently for another appointment. Sometimes, if the FFS schedule was done too early, a virtual follow-up will work.
- **Add the AWV onto an existing visit.** If a patient is scheduled for a regular office visit but is due for AWV, add them together. This requires all staff to be aware and the doctors and other providers to be flexible.
- **Remember to reschedule if the patient cancels or does not show up.**
- **Encourage patients to fill out any questionnaires or intake materials ahead of the visit.** This allows more time for the visit itself.
- **It’s easy for AWV to be clustered toward the end of the year.** Try and schedule those patients with more flexible calendar time (like Sentara Health Plans and Humana) at the beginning of the year.

And finally, enjoy the AWV. It's a personal exam that ties you closer to your patients. Together, you can develop a roadmap that covers their health goals, areas of importance, and other necessary topics like advanced care planning.

Here is a [tip sheet you can share with your patients](#) on the AWV.

## Holiday Blues: Depression and Isolation

This time of year can be difficult for many patients. In addition to incorporating the depression screen, here are some questions to ask:

- What winter/holiday activities do you enjoy? What plans do you have for the holidays this year?
- With the weather getting colder, how often do you go outside for sunlight and fresh air?
- Movement is important throughout the year. How do you keep active when the weather is colder?
- Have you noticed any changes in your sleep patterns with less daylight?
- Have you seen any changes in your eating patterns?
- What sort of social activities do you enjoy this time of year?

Consider the Pyx Health app for patients experiencing some loneliness and isolation. Details below.

## Program Update: Pyx Health Can Help Address Winter Season Loneliness

One moment of human connection can change a life. During the holidays and throughout the winter season, our loneliness solution provider Pyx Health tends to see SDOH needs and self-reported loneliness increase. In fact, **in the past two winter seasons UCLA-3 screenings spiked to 50-70% of Pyx Health members reporting lonely**. Through Pyx Health's combination of human connection and heart-centered technology, patients have a safe space to voice their needs and share their burdens.

The Pyx Health program can offer support in the moment and also shares data with Sentara. This enables our teams to engage and provide the necessary assistance through a difficult time of the year for many. Learn more about how Pyx Health is identifying and addressing loneliness for members in [this two-minute video](#).



With Pyx Health, no one has to feel alone.

If you're interested in promoting this free service to your patients, please access the attached customizable tip sheet. Email [SQC�@sentara.com](mailto:SQC�@sentara.com) or [SACO@sentara.com](mailto:SACO@sentara.com) with any questions.

## Care Corner: Diabetes Updates

Holidays and special events can be especially difficult for those with diabetes. Here is some information to help your patients.

**December is International Sharps Injury Prevention Awareness Month** and a good time to check in with those patients who have diabetes. This [FDA do's and don'ts tip sheet](#) provides more information for your patients.

Please note that the **production of Levemir® FlexPen® insulin is being discontinued April 1, 2024**. There will likely be supply disruptions beginning mid-January 2024. Please see the SBAR (situation, background, assessment, recommendation) below for more information.

**SBAR: Novo Nordisk Discontinuing Levemir®**

If your patient may benefit from no-cost diabetes self-management services, encourage them to get in touch with our care management team through [SQC�@sentara.com](mailto:SQC�@sentara.com) or [SACO@sentara.com](mailto:SACO@sentara.com).

## Pharmacy Highlights: Traveling with Medication

Your patients are going places. Help them have a healthy trip abroad.

Many travelers don't seek health advice when they're planning international trips, even though their travel may put them at risk for preventable illnesses. Include

travel questions in the routine history you gather from patients to assess possible risks and identify opportunities for patient vaccination, medication, and education.

Ask about:

- **Underlying conditions**, allergies, and medications.
- **Special conditions**, such as pregnancy, immunocompromising conditions, history of heart disease or stroke, and recent surgery.
- **Immunization history.**
- **Prior international travel.**
- **Details, such as destination**, trip length, and reason for travel.
- **Travel style**, such as traveling alone or with a group, staying at a hotel or with a host family, and modes of transportation.
- **Special activities**, such as providing medical care or doing disaster relief work, doing adventure travel/extreme sports traveling like skydiving, being on a cruise ship, traveling to high altitudes, or being exposed to open water. Also ask if they expect to be in contact with animals.

International vaccine information can be found in the [Think Travel Vaccine Guide](#). The Centers for Disease Control and Prevention (CDC) has a [Yellow Book](#) with more travel information as well.

### It's RSV Season

This disease can be very dangerous for the youngest and oldest. Those at greatest risk include babies and kids that are:

- Premature infants
- Up to 12 months old—particularly six months and younger
- Two years and younger with congenital heart disease or chronic lung disease

It also includes those with weak immunity and/or have neuromuscular disorders. Read more about ways to prevent RSV before and after birth [here](#).

Older adults are also at-risk, including those with:

- Chronic heart or lung disease



- Weaken immunity
- Other underlying health conditions
- Residencies in long-term care facilities

Here is the [updated vaccine information for the 2023-24 respiratory season](#). And here are [specific guidelines for children who are younger than 19 months](#).

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### Questions About SQCN or SACO?

**For Independent Practices, please contact the Population Health Team:**

**757-455-7330 | [SQCN@sentara.com](mailto:SQCN@sentara.com)**

**757-455-7040 | [SACO@sentara.com](mailto:SACO@sentara.com)**

**For SASD and SMG practices, please contact your Director of Business Operations and Director of Medical Operations, respectively.**

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