

## PROVIDER MEMO

**To:** Santa Clara Family Health Plan Cal MediConnect Primary Care Providers  
**From:** Provider Network Operations  
**Date:** April 13, 2021  
**Subject:** \$150 incentive per AWW encounter in CY2021

---

Dear providers,

Santa Clara Family Health Plan (SCFHP) is encouraging providers to perform Medicare Annual Wellness Visits (AWV). SCFHP Cal MediConnect (CMC) Primary Care Providers who participate will be paid an additional reimbursement of \$150, separate from the claim submission, for every AWW and assessment form completed with CY2021 dates of service.

### Want to learn more?

Physicians and administrative staff are invited to attend an informational webinar to learn more about AWW and the incentive program. Dates, times, and registration details as such:

- Tuesday, May 4, 2021 from 12:00 p.m. to 1:00 p.m. (register at <http://bit.ly/AWWwebinar1>);
- Thursday, May 6, 2021 from 9:00 a.m. to 10:00 a.m. (register at <http://bit.ly/AWWwebinar2>); or
- Wednesday, May 12, 2021 from 1:00 p.m. to 2:00 p.m. (register at <http://bit.ly/AWWwebinar3>).

### What is an AWW?

Annual Wellness Visits are annual preventive visits for Medicare patients to create or update a personalized prevention plan. Components of AWW include Health Risk Assessment (HRA); medical and family history; bio-measurements; cognitive assessments; preventive screenings, and care plan.

The AWW is not a routine physical exam as Medicare does not cover routine physicals. The AWW is a preventive exam and a 100% covered Medicare benefit.

### What about billing?

- For initial AWW, use G0438 to code the patients initial AWW; **only one initial AWW per lifetime.**
- For subsequent AWW, use G0439; **only one AWW every 12 months.**
- For FQHCs, use G0468 for **both** initial and subsequent AWWs.

### What about Evaluation and Management (E&M) Services with AWW?

If an E/M service (eg 99213) is needed at the time of the AWW:

- Inform the patient of their potential responsibility to pay for the deductible/copay for the E/M service.
- For claims submission amend modifier -25 to the E/M code along with the appropriate “G” code (e.g., G0439 and 99213-25).

If you are unable to attend the webinar, please contact Monday Reynolds ([mreynolds@scfhp.com](mailto:mreynolds@scfhp.com)) to learn more.

Thank you for your continued efforts in ensuring quality care for our members.