**What do I need to know BEFORE I schedule an Annual Wellness Visit (AWV)?**

The following information is included in an AWV:

* The AWV includes a Health Risk Assessment. This includes self-reported information from the patient. At a minimum this will address:
  + Demographic data
  + Self-assessment of health risks
  + Psychosocial risks
  + Behavioral risks
  + Activities of Daily Living (ADLs), included by not limited to: bathing, dressing and walking
  + Instrumental ADLs, including but not limited to: shopping, housekeeping, and managing finances.
* Patient must provide of a list of current providers and suppliers regularly involved in their care.
* Patient must provide a medical/family history. At a minimum, the following will be collected and documented:
  + Medical events in the patient’s parents, siblings, and children, including diseases that may be hereditary or place the patient at risk
  + Past medical history or surgical history (including illness, hospital stays, operations, and treatments)
  + Use of (or exposure to) medications and supplements (including vitamins and calcium)
* A review of the patient’s potential risk factors for depression will be performed, including current or past experiences with depression or other mood disorders.
* The patient’s functional ability and safety level will be reviewed. This may include the following:
  + Your ability to perform ADLs
  + Your fall risk
  + Hearing impairment
  + Home safety
* Assessment of height, weight, BMI, blood pressure, and any other routine measurements as deemed appropriate based on medical or family history.
* Assessment to detect any cognitive impairment you may have.
* At the end of the visit, your provider will:
  + Establish a list of risk factors/conditions and make recommendations for primary, secondary or tertiary interventions.
  + Provide health advice to the patient
  + Provide any appropriate referrals for health education or preventative counseling services
    - Includes referrals to programs such as:
      * Falls prevention
      * Nutrition
      * Physical activity
      * Tobacco-use cessation
      * Weight loss
      * Community-based lifestyle interventions to reduce health risks and promote self –management and wellness.

The intention of this exam is prevention and health risk assessment. It does not include chronic medical problems or existing issues. If you require medication refills, lab orders, medical supplies or additional referrals an additional EM code (charge) will be billed to your insurance.

Please fill free to schedule this type of visit with any extender (PA-C, FNP) within our facility at your convenience. If you wish for Dr. Gibbs to perform your AWV, please leave a message with nurse and she will return your call at her convenience and schedule an appropriate amount of time to collect the required information.

Reference:

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/AWV_chart_ICN905706.pdf>