

## Section 4.18 Implement

# Health and Wellness Preventive Services

This tool provides tips for improving use of preventive services among patients in a community-based care coordination (CCC) program, as well as information on reminder systems to aid the care coordinator (CC) in supporting patients needing preventive services.

**Time required:** 3 hours

**Suggested other tools:** CCC Patient Plan; Patient Action Plan; Promoting Patient Self-Management; Technology Tools and Optimization for CCC; Workflow and Process Analysis/Redesign/ Optimization for CCC tool suite

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## How to Use

1. **Review** the use of preventive services in a community-based care coordination (CCC) program and the promotion of preventive services by Medicare.
2. **Recognize** that preventive services include both vaccinations and screenings, as well as the promotion of lifestyle changes.
3. **Understand** how both information technology and workflow changes support reminder systems for patients needing preventive services.
4. **Review** the resources available to aid the care coordinator in encouraging patients to obtain preventive services.

## Preventive Services in Community-Based Care Coordination

The Centers for Disease Control and Prevention (CDC) notes that Americans use preventive services at about half the recommended rate. Preventive services are not limited to vaccinations or screenings, but also include promotion of lifestyle changes. In fact, tobacco use, poor diet, and physical inactivity alone contribute to more than a third of the premature deaths in the U.S.

Providers value the importance of preventive care, but often do not have the time, information technology, or reimbursement mechanisms to ensure they can offer or deliver preventive services. Patients also face financial barriers when insurance copayments and deductibles keep them from getting the services they need. The Affordable Care Act has helped by requiring insurers to cover cost-free preventive care and for Medicare to waive beneficiary co-insurance and deductible liability for certain covered preventive services.

A community-based approach to offering preventive services helps increase the likelihood that preventive services will be offered to the patients. Care coordinators (CCs) can help explain the importance of the preventive services to patients and help patients identify community resources when faced with financial barriers.

## Preventive Services in Medicare Shared Savings Programs

**Welcome to Medicare Visits** – Medicare promotes the use of preventive services by covering a variety of services aimed at disease prevention, detecting disease early when it is most treatable and curable, and managing disease so that complications can be avoided. These include a “Welcome to Medicare” preventive care visit within the first 12 months of a person having Medicare Part B coverage. This visit includes a review of medical and social history related to the person’s health, education and counseling about preventive services, certain screenings, immunizations, and referrals for other care if needed. A written plan is also included that provides details about which screenings, immunizations, and other preventive services the person should have. CCs should encourage those patients eligible for a Welcome to Medicare visit to have the service provided.

**Wellness Visits** – Yearly “Wellness Visits” are also covered for those persons with Medicare Part B, which includes the creation or update of a personalized prevention help plan and a individual screening plan. CCs should track that patients are on schedule with obtaining these Yearly Wellness Visits, and encourage their patients to take advantage of the service.

- Wellness services are covered, without a deductible, under the Part B program if providers accept assignment. If the provider does not accept assignment, coinsurance and Part B deductibles may apply. Persons should be directed to the following website for additional information, including how to find a provider who accepts assignment: <http://www.medicare.gov/coverage/preventive-visit-and-yearly-wellness-exams.html>
- The CMS website at <http://www.cms.gov/Medicare/Prevention/PrevntionGenInfo/index.html> also provides information, resources and tools to help support the delivery and awareness of preventive services and screenings covered by Medicare. It also identifies health care providers and suppliers with the information needed to effectively file claims for services provided to Medicare beneficiaries.

## Preventive Health

In addition to the importance to individual patients and to population health, “Preventive Health” is one of the four quality measure areas for accountable care organizations (ACOs) participating in the Medicare Shared Savings Program (MSSP). The following are the measures included, each of which is contained in the Medicare Part B benefits described above. CCs should encourage all eligible patients to have these preventive services according to their appropriate schedule and as applicable to each specific patient:

- Influenza immunization
- Pneumococcal vaccination
- Adult weight screening and follow-up
- Tobacco use assessment and cessation intervention
- Depression screening
- Colorectal cancer screening
- Mammography screening
- Blood pressure screening

## Preventive Service Reminder Systems

In addition to the written plans that Medicare requires providers to include in their Welcome to Medicare and Yearly Wellness Visits, both information technology and workflow changes can help support reminders for patients needing preventive services. (See *Technology Tools and Optimization for CCC*, and the *CCC Workflow and Process Analysis/Redesign/Optimization for CCC* tool suite.)

### Centralized Database or Registry

A centralized database or registry of preventive service reminders is being developed in a number of communities to support CCC programs. Such a resource can identify what services the patient has had, and can trigger both provider and patient reminders.

A centralized database or local registry:

- Must have the ability for providers to enter preventive service information unrelated to claims. *For example*, a patient may get a flu shot at a local health fair. The providers at the fair should be able to access at least a limited amount of pertinent patient information, such as allergies, and be able to upload information that the service was delivered and any findings, if applicable.
- Should enable any provider within a community to enter information about, and access records of, preventive service delivery and findings.
- Should have the ability for providers to enter exceptions to rules for certain patients. Allergy information is a common entry needed for vaccinations, but there may be personal patient information that must also be added for other types of reminders.

## Patient Reminders

Providers receiving reminders – either from a centralized database/registry, a separate registry, or their own electronic health record – should use this information to provide reminders to patients. These reminders may be in the form of “recall letters” (as they are sometimes called), postcards and/or telephone calls, depending on the nature of the service.

- CCs should have access to these reminders so follow up can be provided to ensure the patient gets the applicable services.
- Registration personnel at provider offices should also have access to reminders about preventive services so they can help remind patients when they call or arrive for their appointment.
- Reminders about certain preventive service needs may be more appropriately delivered to a nurse or provider for delivery to the patient – during an office visit or via phone if no visit is scheduled. These reminders may be triggered by information documented in the system, such as that the patient uses tobacco, or by the CC or other person making a referral, such as for depression screening.
- Flags within information systems at the time of an appointment should also reflect appropriate workflow. For example, a long list of reminders at the start of a patient visit may not be helpful if there is a more urgent matter that brought the patient to the office. Yet, the reminder could be applicable once the situation has been addressed.

## Patient Reminder Sensitivity

Patient reminders should be appropriate not only to the preventive service needed, but their delivery modality should be sensitive to the nature of the reminder.

- A reminder to get your teeth cleaned or to get a flu shot is generally not something that requires a high degree of sensitivity. In fact, some of these reminders can not only be targeted to specific patients but made available as reminders to an entire community, e.g., the new flu vaccine is now available. Public service announcements are offered via the media for colonoscopies, mammographies, exercise, tobacco cessation, depression screening, etc. CCs can use these announcements as triggers to talk more precisely with patients about specific needs.

*For example*, a comment such as “I saw celebrity X on TV last night talking about how he got help with his depression. Depression is so very common and can really sap one’s energy. I wonder if you might want to consider being screened for depression as a preventive measure. Knowing the signs that might come at some point can help you avoid depression before it takes over.”

- A reminder to talk to a specific patient about certain preventive services, such as diet and exercise, however, can have a high degree of sensitivity for many patients and should be handled one-on-one with the patient. Gentle nudging is more effective here than being prescriptive.

*For example*, “Let’s talk about your nutritional needs to make sure you get the foods you need to keep you healthy” may be a much better approach than to say “You need to go on a diet.”

## **Patient Follow-up**

Patient follow up is needed if the patient does not get the appropriate preventive service.

- A centralized database or local registry should be able to generate lists of patients for whom the needed preventive service was not performed. Office staff and/or the CC should follow up on these preventive services with the patient. It is best to ask the patient if he/she had the service, as it is possible it was performed elsewhere and not reported.
- If the patient has not received the service yet, the patient should be asked about any concerns and follow up should be done to overcome any financial barriers, provide information, or address other issues. Linking the service to staying healthy is very important.

## **Personal Lifestyle Changes**

Addressing personal lifestyle changes is often more difficult than addressing other forms of preventive services. This Toolkit offers a variety of strategies for communicating with patients, helping them create a patient action plan, guiding patient self-management, and others that promote healthy lifestyles. It is also possible to “borrow” from the reminder strategies for the more traditional preventive services when encouraging lifestyle changes.

- Providers can write “green” prescriptions for lifestyle changes. Giving the patient a prescription for diet, exercise, nutritional services, tobacco cessation, and some screenings may encourage patients to be more inclined to follow through. Such prescriptions can help take the misinformation out of the equation by demonstrating support for certain services.
- Community services can promote low or even no-cost means to exercise, inform people about health hazards, and encourage group support for lifestyle changes. Patients who are isolated could be aided by community services staff reaching out to the patient. Even the act of getting on a special services bus with others to go to the grocery store can provide much needed socialization, and some community services representatives can assist patients in selecting nutritional products.
- Multiple, uniform messages from all involved in a CCC program help the patient recognize that such behavior modifications are the norm. While “everyone does this” is a mantra of the teenager, it could well aid seniors and those with persistent disease conditions to recognize that others are successfully making lifestyle changes.

## **Preventive Services Resources**

A variety of resources can aid the CC in encouraging patients to obtain preventive services:

- *Pamphlets and brochures* are widely distributed by a variety of health-related foundations. They are written in plain language and often include large font, pictures, tools, and testimonials. Many of these are also available on the Internet. For example, the American Lung Association is devoted to reducing the risk for lung cancer, with numerous tools on

their website. Available at: <http://www.lung.org/lung-disease/lung-cancer/about-lung-cancer/preventing-lung-cancer.html>

- Many states have instituted a variety of *preventive services campaigns*. As an example, California’s “No Butts” program offers a 1-800-No-Butts helpline in a variety of languages. The website also offers free brochures for providers to distribute. Available at: <http://www.nobutts.org/>
- *Public health departments* and other state government agencies are increasingly focusing on health lifestyle promotion. Indiana’s Healthy Weight Initiative is an example of a program geared toward public health departments, but includes a variety of tools to use directly with patients. Available at: [http://www.inhealthyweight.org/files/IN\\_State\\_Obesity\\_Plan\\_2010-2020.pdf](http://www.inhealthyweight.org/files/IN_State_Obesity_Plan_2010-2020.pdf),
- *Faith-based programs* are recognizing the importance of promoting health and wellness as well. Some of these are partnering with insurers to earn funding for their activities. For example, Blue Cross Blue Shield of Michigan supports participating Body and Soul churches enrolled in the Blues’ Community Challenge to encourage health eating and exercise – especially to reduce the risk of cancer in African Americans. Available at: <http://www.mibluesperspectives.com/2013/05/23/launching-a-faith-based-community-partnership-to-encourage-healthy-eating-and-exercise/>
- *Medical specialty societies* are also offering preventive services support tools and information. An example of an initiative that is helpful in thwarting misinformation and encouraging appropriate choices – for both providers and patients – is an initiative of the American Board of Internal Medicine (ABIM) Foundation, called “Choosing Wisely.” This website is focused on encouraging physicians, patients and other health care stakeholders to think and talk about medical tests and procedures that may be unnecessary, and in some instances can cause harm. Leading specialty societies have created lists of things physicians and patients should question. The website also provides evidence-based recommendations that should be discussed by the provider and patient to help make wise decisions about the most appropriate care based on a patient’s individual situation. Available at: <http://www.choosingwisely.org/>

Care coordinators should tap their own local community resources, not only to seek help with individual patient needs, but to identify local resources that might be geared toward certain cohorts of patients, local ethnic traditions, customs, languages, and so on.

### For support using the toolkit

Stratis Health • Health Information Technology Services

952-854-3306 • [info@stratishealth.org](mailto:info@stratishealth.org)

[www.stratishealth.org](http://www.stratishealth.org)

