

Medicare Annual Wellness Visit Scheduling for Clinical and Clerical Staff

Cerner Revenue Cycle Ambulatory EDUCATION

Medicare Annual Wellness Visit Types

Welcome to Medicare Visit

- Provider visit only
- Occurs within 12 months of first Medicare Part B enrollment
- Covered once per lifetime

Initial Medicare Wellness Visit

- RN visit preferred
- Occurs 12 months after the Welcome to Medicare provider visit **OR** after first 12 months of Medicare Part B enrollment (after the patient is no longer eligible for the Welcome to Medicare visit)
- Covered only once per lifetime

Subsequent Medicare Wellness Visit

- RN visit preferred
- Completed 12 months after Initial Medicare Wellness visit and every 12 months thereafter

Health Maintenance Exam

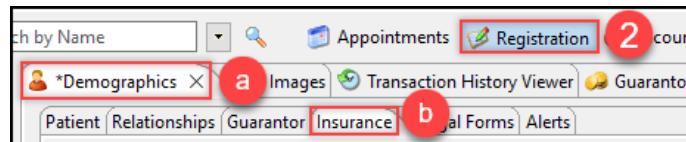
- Not covered by Straight Medicare
- Medicare Advantage Plan – perform insurance verification to verify eligibility for this visit type

Verify Insurance Coverage and Visit Type Eligibility

1. In Revenue Cycle, search for and select the appropriate patient.

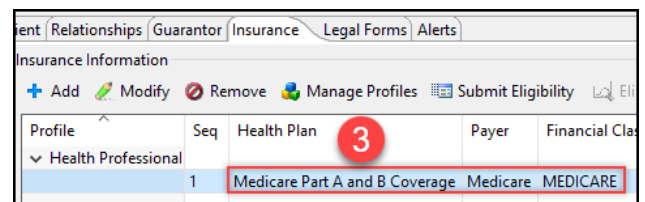
2. Within the **Registration** patient perspective:

- Select the **Demographics** tab.
- Select the **Insurance** tab.



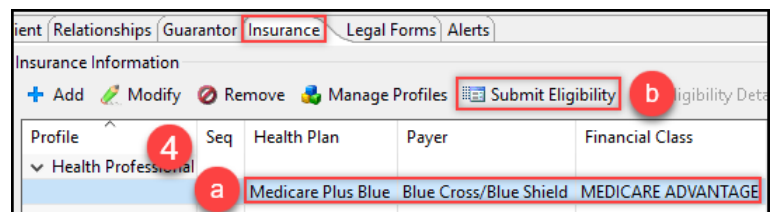
3. If the patient has Straight Medicare listed as the primary payer (no advantage plan):

- Proceed to the Verify Prior Medicare Annual Wellness Visits section below.

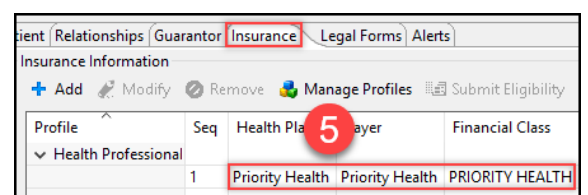


4. If the patient has a Medicare Advantage plan:

- Click the health plan to highlight.
- Click **Submit Eligibility**.
- Proceed to the Verify Prior Medicare Annual Wellness Visits section below.
- Verify that the patient has coverage for the specified visit type.



5. If the patient has any other insurance listed or if Medicare is not primary, Medicare Annual Wellness visits **cannot** be scheduled.



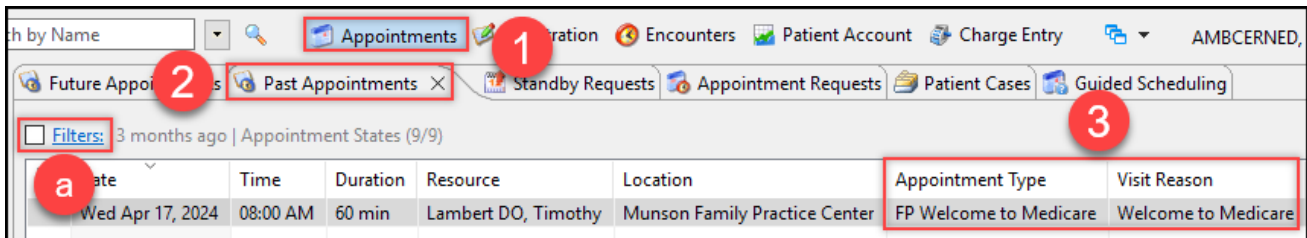
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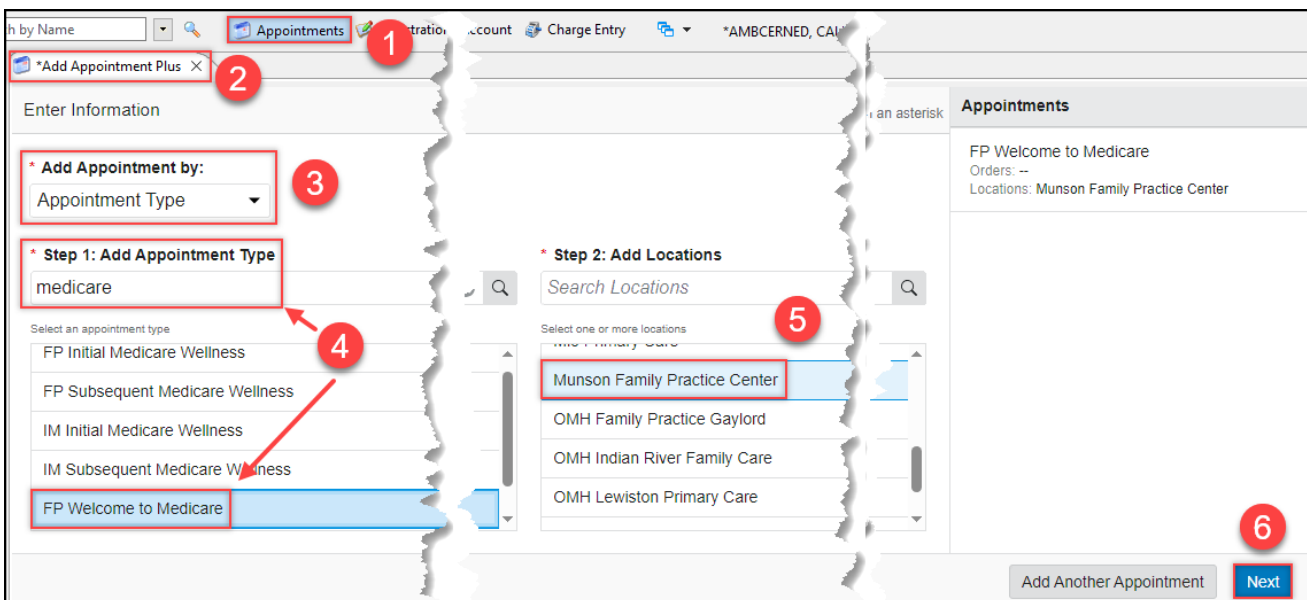
Verify Prior Medicare Annual Wellness Visits

1. Navigate to the **Appointments** patient perspective.
2. Select the **Past Appointments** tab.
 - a. Remove filters by unchecking the box if needed.
3. Review past appointments using the criteria above to determine the appropriate Medicare Wellness visit type.



Scheduling Medicare Annual Wellness Visits

1. Navigate to the **Appointments** patient perspective.
2. Select the **Add Appointment Plus** tab.
3. Select **Appointment Type** from the Add Appointment by: drop-down menu.
4. Search for and select the appropriate appointment type (see below for criteria).
5. Search for and select the appropriate location.
6. Click **Next**.



7. On the subsequent screens:
 - a. Enter the appointment details.
 - b. Click **First Available** or **Schedule**.
 - c. Select the appropriate date/time.
 - d. Confirm the appointment.

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If **no prior Medicare Wellness visits** have been scheduled and the **patient is within 12 months of Medicare enrollment**:

1. Select Appointment Type as **Welcome to Medicare**.
2. Select the appropriate resource and location.
3. Schedule with a **provider**.

If **no prior Medicare Wellness visits** have been scheduled and the **patient is NOT within 12 months of Medicare enrollment**:

1. Select Appointment Type as **Initial Medicare Wellness**.
2. Select the appropriate **nurse visit** (or provider) **schedule** and location.

If the **patient has had a Welcome to Medicare visit** and it has been **more than 366 days**:

1. Select Appointment Type as **Initial Medicare Wellness**.
2. Select the appropriate **nurse visit** (or provider) **schedule** and location.

If the **patient has had an Initial Medicare Wellness visit** and it has been **more than 366 days**:

1. Select Appointment Type as **Subsequent Medicare Wellness**.
2. Select appropriate **nurse visit** (or provider) **schedule** and location.

Note: Patients with a Medicare Advantage plan may be eligible for both a Medicare Wellness visit and a Health Maintenance visit. Please submit eligibility and verify coverage to determine which visit type is appropriate.