

Provider Bulletin

HEDIS® News You Can Use

Annual Wellness Visit (AWV)



Importance of AWV

Annual Wellness Visits are essential for developing a personalized prevention plan that helps identify and address care gaps. These visits support value-based care by addressing lifestyle, social determinants, cognitive health, medication review, and chronic disease management—all key to improving long-term health outcomes and strengthening the provider patient relationship.



Coding information

- G0402 – Initial Preventive Physical Exam (first 12 months of Medicare Part B)
- G0438 – Initial Annual Wellness Visit (after IPPE)
- G0439 – Subsequent AWV (once every 12 months)

For up-to-date, measure specific codes to use, go to [MC Gap Closure Reference Guide](#)



Measure requirements

One AWV per year for Medicare Part B members. Must include:

- Health Risk Assessment (HRA)
- Review/update medical history
- Height, weight, blood pressure, BMI
- Functional status & cognitive screening
- Personalized prevention plan (5–10 years)
- Optional: Advance Care Planning, social determinants of health (SDOH)

For more detailed measure info, go to [MC Gap Closure Reference Guide](#)



Common reasons for Gaps in Care

- Members not scheduled within 12-month timeframe
- Incomplete documentation or missing required components
- Incorrect coding - Advance Care Planning/SDOH completed but not coded
- Member in hospice or deceased (valid exclusions)

For members assigned but choosing not to establish care, go to [MC PCP Change Request Form](#)



Member education

- AWWs are free with Medicare Part B
- Focus on prevention, not physicals
- Encourage annual scheduling
- Highlight benefits: early detection, personalized plan, medication review, lifestyle counseling
- Explain the Health Risk Assessment (HRA)



Great resources

- [CMS Medicare Learning Network \(MLN\): Medicare Wellness Visits Guide](#)
- [NCQA HEDIS Specifications: NCQA Measures](#)

**Thank you for the care you provide
to our members**



Best Practices

Tips to improve results

- Use structured templates/electronic medical record (EMR) checklists for documentation.
- Engage nursing staff or care coordinators for data gathering.
- Train providers on coding to reduce denials.
- Use AWW to close other HEDIS care gaps (e.g., cancer screenings, immunizations).
- Explain the next steps.
- Provide a copy of the plan.
- Provide follow-up scheduling during the visit.