

#### **04.26.25 POLICY PROPOSAL 8**

***Title: Medicare Annual Well Visit (AWV) Abuse***

**Full Name\***

John Ropp

**Designation\***

Physician

**Are you submitting on behalf of a county medical society, specialty society, or other member?\***

No

**If YES, please indicate the name of the county medical society, specialty society, or other member(s) for which you represent.**

*(If NO, you may skip.)*

**Submission / Idea\***

AWVs are being performed by various providers and organizations with either no previous patient relationship, chronic care management role, or ability to effect meaningful care for these patients. These providers (which can include visiting nurses, house calls, hospital groups, insurers/health plans, and other private businesses) are stealing visits from primary care offices where these patients are likely to have longstanding relationships with clinicians. These visits are performed without the knowledge of primary care physicians and there is no coordination of care or follow up. This activity steals chronic care visits from physicians, affects attribution of patients away from their physicians to others, affects value based care agreements, reduces private practice revenue and participation in certain plans including ACOs, and undermines plans for follow up on important issues identified including gaps in care and practice star rating. This practice is at least abuse of the intended AWV process and lends itself to fraud. Perhaps most importantly, it threatens patient safety since important details determined in the AWV process can be missed, resulting in patients missing follow up visits, testing, screening, and treatments.

**Evidence / Support for Proposal\***

Personal and colleague experience in full-time clinical practice.

**Requested Action: What action is required to achieve this idea?**

*(i.e. Enact legislation, have a state agency review an issue, enact an SCMA policy statement on a topic, or other action?)\**

Enact SCMA policy, notify the DOI and BME/BON of this practice and review this issue.

**Why is the Requested Action important?\***

It affects physicians and their practices directly by undermining the patient-physician relationship, removes patient attribution from physicians, steals visit times and revenue from physicians, and risks patient care by missing important developments in their care. It is also a patient safety issue.

**If there are additional details not addressed above that you would like to share, please provide them here.**

*(If you feel that the above information is sufficient, you may skip.)*