



# Value-based Care Chronicle: Guide to Improving Performance

February 2026

## Annual Wellness Visits

*From Prevention to Performance*

Annual Wellness Visits (AWVs) are more than a yearly appointment. They are a meaningful opportunity to focus on the issues that matter most to older adults and address concerns that are often overlooked in a typical physical exam. During an AWV, you review medical history, medications, risk factors, cognitive status, and preventive screenings while identifying chronic conditions early and closing care gaps.

Actively encouraging patients to schedule their AWV not only helps them stay on track with their health, but also strengthens documentation, quality performance, and care coordination across your practice.

### AWV Tips

- Schedule for next year's visit while at the current visit.
- Schedule any chronic follow-up appointments (A1c visits and frequent hospital visits).
- Utilize pre-visit planning and standing orders.
- The medical record must support all diagnoses, and all services are billed on the claim.

### Initial AWV

1. Perform a Health Risk Assessment (HRA) - can be completed virtually via EMR portal
2. Establish patient's medical & family history
3. Establish current providers & suppliers list
4. Measure height, weight, BMI, & BP
5. Detect any cognitive impairments
6. Review potential depression risk factors
7. Review functional ability & level of safety
8. Establish appropriate patient written screening schedule
9. Establish list of risk factors & conditions

### Subsequent AWV

1. Review and update HRA
2. Update medical & family history
3. Update current providers & suppliers list
4. Measure weight & BP
5. Detect any cognitive impairments
6. Update list of risk factors & conditions
7. Update patient PPPS (as necessary)
8. Provide ACP services at patient's discretion
9. Review current opioid prescriptions
10. Screen for potential SUD
11. SDOH risk assessment, with patient's consent

10. Provide personalized patient health advice & appropriate referrals
11. Provide ACP services at patient's discretion
12. Review current opioid prescriptions
13. Screen for potential substance use disorders
14. SDOH risk assessment, with patient's consent

**Billing Code: G0439**

**Billing Code: G0438**

*New in 2025: Medicare will pay for office/outpatient (O/O) evaluation and management of visit (E/M) complexity add on code G2211 when the O/O E/M base code is reported by the same provider on the same day as an AWW, vaccine administration, or any Part B Preventive Service including the IPPE, provided in the office or outpatient setting.*

AWV Tips & Benefits

AWV Pt. Flyer

2026 AWW Changes

Rethinking MWVs

## Medication Adherence

### Statin Measures

Statin adherence ranges from just 30-64%, and it tends to decline over time. Why? Many patients stop taking their medication due to concerns about side effects, medication intolerances, or preconceived beliefs about treatment. Other patients face challenges like complex regimens, cost barriers, mental health concerns, or simply a lack of follow-up.

The good news? Education makes a difference. Studies show that when patients understand the benefits of statins, adherence rates and cholesterol treatment outcomes improve. AWWs and chronic care management appointments are key opportunities to reinforce these messages.

At CHES, our pharmacists and pharmacy technicians can help improve adherence by monitoring claims data, educating patients with evidence-based information, and addressing barriers to statin nonadherence.

#### CRACKING THE STATIN INTOLERANCE CODE

Practical, evidence-based strategies to identify true statin intolerance, manage side effects effectively, and keep patients on lipid-lowering therapy to reduce cardiovascular risk. [READ MORE](#)

#### STICKING WITH STATINS

Adherence to statin therapy for patients with diabetes or cardiovascular disease is a significant challenge for both patients and providers. [READ MORE](#)

#### SUPD & SPC QUALITY MEASURES

Statin use in persons with diabetes (SUPD) and statin therapy persons with cardiovascular disease (SPC) exclusion codes. [DOWNLOAD](#)

## CODING CORNER: AWVs

Accurate coding is essential to capturing the full value of AWVs. When coded correctly, AWVs contribute to more complete patient records, improved risk adjustment accuracy, and stronger quality performance.

### A well-documented AWV helps:

- Capture and revalidate chronic HCC conditions to reflect the patient's true health status each year.
- Ensure accurate risk adjustment and appropriate reimbursement.
- Close coding and care gaps by identifying unmanaged or progressing conditions.
- Support continuity of care and population health through alignment between clinical documentation and risk-based contracts.

### [Documenting and Coding AWVs Flyer](#)

#### Know the Difference: Z00.00 vs. Z00.01

Choosing the correct Z00 code is an important part of accurate risk adjustment data capture. Care team members play a critical role by ensuring abnormal findings and new concerns are identified during intake and screenings. By gathering updated medical, surgical, and family histories, your team can help providers document chronic conditions accurately and completely.

Z00.00	Encounter for General Adult Medical Exam WITHOUT Abnormal Findings	<ul style="list-style-type: none"> <li>• Use when a preventive wellness exam is performed and no abnormal findings are documented during the visit.</li> <li>• No new diagnoses, symptoms, or concerns arose during the visit.</li> </ul>
Z00.01	Encounter for General Adult Medical Exam WITH Abnormal Findings	<ul style="list-style-type: none"> <li>• Use when a preventive exam is performed, but the provider also identifies and documents one or more abnormal findings (e.g., high BP, rash, new symptom).</li> <li>• Must be supported by documentation of the abnormal condition(s) discovered during the preventive visits.</li> </ul>

## Patient Education Pointer of the Month

### *Trust: The Cornerstone of the Doctor Patient Relationship*

Value-based care and patient-centric care go hand in hand, and the doctor-patient relationship is at the core of this philosophy. An effective doctor-patient relationship is built on the foundation of trust. Patients who trust their doctor have a perception of better care, greater acceptance and adherence to treatment plans, and access health care services more often.

Building trust takes time. It's an ongoing process that requires effort, sincerity, and a patient-centric approach. Learn about building a strong and meaningful relationship with patients here:

<https://www.chesshealthsolutions.com/2023/10/10/trust-the-cornerstone-of-the-doctor-patient-relationship/>.

## Additional Resources

- [VBC in 2026: Key Trends Health Care Leaders Should be Planning for Now](#)
- [The LEAD Model: CMS's New Approach to Accountable Care](#)

[Past VBC Chronicle Editions](#)

CHES Education

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