Medicare Annual Wellness Visit (HCPCS Codes G0438 or G0439)

A
Review health risk assessment (especially reports of functional deficits), clinician observations, and self-reported concerns; query patient and, if available, informant.

Yes
Signs/symptoms of cognitive impairment present

No

B*
Conduct brief structured assessment.
Patient Assessment: GPCOG or Mini-Cog or MIS
Informant assessment of patient: AD8 or GPCOG or Short IQCODE

Yes
Informant available to confirm

No

Brief assessment(s) triggers concerns:
Patient: GPCOG <5 (5-8 score is indeterminate without informant) or Mini-Cog ≤3 or MIS ≤4
Informant: AD8 ≥ 2 or GPCOG informant score ≤3 with patient score <8 or Short IQCODE ≥ 3.38

Yes
Follow-up during subsequent annual wellness visit

No

C
Refer for full dementia evaluation or conduct full dementia evaluation.
If informant is available during annual wellness visit, can follow up same day and bill for evaluation and management service with CPT codes 99201-99215. If not, schedule new visit for evaluation and request presence of family/companion to facilitate assessment.

* No one tool is recognized as the best brief assessment to determine whether a full dementia evaluation is needed. Alternate tools (eg, Mini Mental State Exam, Saint Louis University Mental Status Exam, or Montreal Cognitive Assessment) can be used at the discretion of the clinician. Some providers use multiple brief tools prior to referral or initiation of a full dementia evaluation.

AD8 = The Eight-item Informant Interview to Differentiate Aging and Dementia; GPCOG = General Practitioner Assessment of Cognition; MIS = Memory Impairment Screen; Short IQCODE = Short Informant Questionnaire on Cognitive Decline in the Elderly